| Fill in this information to identify your case: |   |                                    |
|---|---|------------------------------------|
| United States Bankruptcy Court for the :        |   |                                    |
| NORTHERN District of ILLINOIS (State)           |   |                                    |
| Case Number (If known):                         | Chapter you are filing under:  Chapter 7 Chapter 11 Chapter 12 Chapter 13 | Check if this is an amended filing |

### **Official Form 101**

### **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together-called a joint case-and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1:          | Identify Yourself   |                            |   |
|------------------|---|----------------------------|---|
|                  |   | About Debtor 1:            | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. Your          | full name   |                            |   |
| gover<br>identif | the name that is on your<br>nment-issued picture<br>fication (for example,<br>driver's license or | Bessie<br>First name       | First name                                    |
| passp            |   | Middle name  Cain          | Middle name                                   |
| identif          | your picture<br>fication to your meeting<br>he trustee.   | Last name                  | Last name                                     |
|                  |   | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III)                    |
| 2. All of        | ther names you  |                            |   |
|                  | used in the last 8  | First name                 | First name                                    |
|                  | le your married or<br>en names.   | Middle name                | Middle name                                   |
|                  |   | Last name                  | Last name                                     |
|                  |   | First name                 | First name                                    |
|                  |   | Middle name                | Middle name                                   |
|                  |   | Last name                  | Last name                                     |
| your             | the last 4 digits of<br>Social Security   | xxx - xx - <u>3380</u>     | XXX - XX                                      |
| Indivi           | er or federal<br>dual Taxpayer  | OR                         | OR  |
| Identi           | fication number   | <b>9</b> xx - xx           | <b>9</b> xx - xx                              |

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Document Cain Bessie Μ Debtor 1 Case Number (if known) Last Name

|    |  | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):   |  |  |
|----|--|---|---|--|--|
| 4. | Any business names<br>and Employer<br>Identification Numbers<br>(EIN) you have used in<br>the last 8 years<br>Include trade names and<br>doing business as names | Business name  Business name  EIN  EIN  | Business name  Business name  EIN  EIN  |  |  |
| 5. | Where you live   | 1824 Joppa Ave.   | If Debtor 2 lives at a different address:   |  |  |
|    |  | Number Street   | Number Street   |  |  |
|    |  | Zion IL 60099   |   |  |  |
|    |  | City State ZIP Code   | City State ZIP Code   |  |  |
|    |  | County  | County  |  |  |
|    |  | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from the one above, fill it in here. Note that the court will send any notices this mailing address. |  |  |
|    |  | Number Street   | Number Street   |  |  |
|    |  | P.O. Box  | P.O. Box  |  |  |
|    |  | City State ZIP Code   | City State ZIP Code   |  |  |
| 6. | Why you are choosing   | Check one:  | Check one:  |  |  |
|    | this district to file for bankruptcy.  | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                                | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                            |  |  |
|    |  | have another reason. Explain. (See 28 U.S.C. § 1408   | ☐I have another reason. Explain.<br>(See 28 U.S.C. § 1408   |  |  |
|    |  |   |   |  |  |
|    |  |   |   |  |  |
|    |  |   |   |  |  |

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Document Cain Bessie Μ Debtor 1 Case Number (if known) Last Name

| Pa  | Tell the Court About You                        | ır Bankruptcy  | Case                                   |   |  |  |  |  |  |
|-----|---|--|--|---|--|--|--|--|--|
| 7.  | The chapter of the<br>Bankruptcy Code you       |  |  | -   |  | equired by 11 U.S.C. § 342(b) for Individuals lage 1 and check the appropriate box.  |  |  |  |
|     | are choosing to file                            | ■ Chapter 7  |  |   |  |  |  |  |  |
|     | under   | ☐ Chapter 11   |  |   |  |  |  |  |  |
|     |   | ☐ Chap   | ter 12                                 |   |  |  |  |  |  |
|     |   | ☐ Chap   | ter 13                                 |   |  |  |  |  |  |
|     |   |  |  |   |  |  |  |  |  |
| 8.  | How you will pay the fee                        | I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. |  |   |  |  |  |  |  |
|     |   | _  |  |   | •  | ose this option, sign and attach the in Installments (Official Form 103A).   |  |  |  |
|     |   | By la<br>less t<br>pay t   | w, a judge<br>han 150%<br>he fee in ir | e may, but is not<br>o of the official ponstallments). If y             | required to, waiv<br>overty line that ap<br>ou choose this o | est this option only if you are filing for Chapter 7. The your fee, and may do so only if your income is oplies to your family size and you are unable to ption, you must fill out the <i>Application to Have the</i> 3) and file it with your petition. |  |  |  |
| 9.  | Have you filed for bankruptcy within the        | ■ No   | N.                                     |   |  |  |  |  |  |
|     | last 8 years?                                   | ☐ Yes.   | District No.                           | one   | When   | Case Number  MM / DD / YYYY  |  |  |  |
|     |   |  | District No                            | one   | When   | Case Number  |  |  |  |
|     |   |  |  |   |  | MM / DD / YYYY   |  |  |  |
|     |   |  | District                               |   | When   | Case Number  |  |  |  |
|     |   |  |  |   |  | MM / DD / YYYY   |  |  |  |
| 10. | Are any bankruptcy                              | ■ No   |  |   |  |  |  |  |  |
|     | cases pending or being filed by a spouse who is | ☐ Yes.   | Debtor                                 |   |  | Relationship to you  |  |  |  |
|     | not filing this case with                       |  |  |   |  | Case Number, if known  |  |  |  |
|     | you, or by a business parter, or by affiliate?  |  |  |   |  | MM / DD / YYYY   |  |  |  |
|     |   |  |  |   |  | Relationship to you  |  |  |  |
|     |   |  | District                               |   | When   | Case Number, if known  |  |  |  |
| _   |   |  |  |   |  |  |  |  |  |
| 11. | Do you rent your residence?                     | ■ No.<br>□ Yes.  | Go to line<br>Has your l<br>residence  | landlord obtained   | an eviction judgme   | nt against you and do you want to stay in your   |  |  |  |
|     |   |  | ☐ Yes.                                 | Go to line 12.<br>. Fill out <i>Initial Stat</i><br>bankruptcy petition |  | viction Judgment Against You (Form 101A) and file it with  |  |  |  |

| Debto | Case 17-3425   | 52 Doc   | 1 Filed 11/15/17 Document Cain  | Entered 11/15/17 16:04:02<br>Page 4 of 55<br>Case Number (if known) | Desc Main   |
|-------|--|--|---|---|---|
|       | First Name   | Middle Name  | Last Name   | · · · · · · · · · · · · · · · · · · ·                               |   |
| Par   | t 3: Report About Any Busin  | esses You Owr  | ı as a Sole Proprietor  |   |   |
|       |  |  |   |   |   |
| 12.   | Are you a sole proprietor of any full- or part-time business?  | ■ No.<br>□ Yes.  | Go to Part 4.  Name and location of business  | 5   |   |
|       | A sole proprietorship is a<br>business you operate as an<br>individual, and is not a<br>separate legal entity such as  |  | Name of business, if any  |   |   |
|       | a corporation, partnerhsip, or LLC.  If you have more than one sole proprietorship, use a separate sheed and attach it to this petition.                                     |  | Number Street   |   |   |
|       |  |  | City  | State   | Zip Code  |
|       |  |  | Check the appropriate box to  | describe your business:   |   |
|       |  |  | ☐ Health Care Business (a   | s defined in 11 U.S.C. § 101(27A))                                  |   |
|       |  |  | ☐ Single Asset Real Estate  | (as defined in 11 U.S.C. § 101(51B))                                |   |
|       |  |  | ☐ Stockbroker (as defined   | in 11 U.S.C. § 101(53A))  |   |
|       |  |  | ☐ Commodity Broker (as d  | efined in 11 U.S.C. § 101(6))                                       |   |
|       |  |  | ■ None of the above   |   |   |
|       | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D).             | appropriation balance strong document.  No. I  No. I  Yes. I | the deadlines. If you indicate that neet, statement of operations, consider that a do not exist, follow the proced arm not filing under Chapter 11.  am filing under Chapter 11, but the Bankruptcy Code. | I am NOT a small business debtor according to the                   | your most recent<br>or if any of these<br>e definition in |
| 14.   | Do you own or have any   | No.  |   |   |   |
| 14.   | property that poses or is<br>alleged to pose a threat<br>of imminent and<br>indentifiable hazard to<br>public health or safety?  |  | What is the hazard?   |   |   |
|       | Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? |  | If immediate attention is needed  | I, why is it needed?  |   |
|       |  |  | Where is the property?Number  | er Street   |   |

City

State

ZIP Code

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Document

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Debtor 1

Bessie

Abo

Case Number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

You must check one:

Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

| ut Debtor 1: | About De |
|--------------|----------|
|              |          |

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any,

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing al | oout |
|--|------|
| credit counseling because of:              |      |

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

#### ebtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. approved You must file a certificate from the agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to r | eceive a briefing about |
|------------------------|-------------------------|
| credit counseling bed  | cause of:               |

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 17-34252 Entered 11/15/17 16:04:02 Desc Main Doc 1 Filed 11/15/17 Page 6 of 55

Document Cain Bessie Μ Debtor 1 Case Number (if known)

|   | First Name   | Middle Name Las   | st Name  |  |
|---|--|---|--|--|
| Pai   | t 6: Answer These Question   | s for Reporting Purposes  |  |  |
| 16.   | What kind of debts do you have?  | 16a. Are your debts prim as "incurred by an indiv                                 | narily business debts? Business debts are of or investment or through the operation of the bu  | debts that you incurred to obtain siness or investment.  |
| 17.   | Are you filing under Chapter 7? Do you estimate that after   | Yes. I am filing under 0  | der Chapter 7. Go to line 18.  Chapter 7. Do you estimate that after any exen spenses are paid that funds will be available to describe the content of the c |  |
|   | any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | Mo.<br>☐Yes.  | penses are paid that funds will be available to t  | isinbute to disecuted deditors:  |
| 18.   | How many creditors do you estimate that you owe?   | ■ 1-49<br>□ 50-99<br>□ 100-199<br>□ 200-999                                       | ☐ 1,000-5,000<br>☐ 5,001-10,000<br>☐ 10,001-25,000   | ☐ 25,001-50,000<br>☐ 50,001-100,000<br>☐ More than 100,000   |
| 19.   | How much do you estimate your assets to be worth?  | □ \$0-\$50,000 □ \$50,001-\$100,000 ■ \$100,001-\$500,000 □ \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million  | □\$500,000,001-\$1 billion □\$1,000,000,001-\$10 billion □\$10,000,000,001-\$50 billion □More than \$50 billion  |
| 20.   | How much do you estimate your liabilities to be?   | □ \$0-\$50,000 □ \$50,001-\$100,000 ■ \$100,001-\$500,000 □ \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million  | □\$500,000,001-\$1 billion □\$1,000,000,001-\$10 billion □\$10,000,000,001-\$50 billion □ More than \$50 billion |
| Pa  | t7: Sign Below   |   |  |  |
| For   | you  | correct.  If I have chosen to file under  | n, and I declare under penalty of perjury that the<br>r Chapter 7, I am aware that I may proceed, if el<br>de. I understand the relief available under each  | igible, under Chapter 7, 11,12, or 13  |
| If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).  |  |   |  |  |
| I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.  I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  18 U.S.C. §§ 152, 1341, 1519, and 3571. |  |   |  |  |
|   |  | ignature of Debtor 2  |  |  |
|   |  | Executed on 11/13/  | /2017<br>/ DD / YYYY   | executed onMM / DD / YYYY  |

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| Debtor 1 | Bessie   | M  | Document<br>Cain  | Page 7 of 55 Case Number   | (if known)                     |   |
|----------|--|--|---|--|--------------------------------|---|
|          | First Name   | Middle Name  | Last Name   |  |                                |   |
| represe  | r attorney, if you are<br>nted by one<br>re not represented<br>ttorney, you do not | proceed under Chapte<br>each chapter for whic<br>11 U.S.C. § 342(b) ar | er 7, 11, 12, or 13 of title find the person is eligible. I | etition, declare that I have informed 11, United States Code, and have e also certify that I have delivered to 17(b)(4)(D) applies, certify that I have tition is incorrect. | explained the the the debtor(s | e relief available under<br>s) the notice required by |
| need to  | file this page.  | 🗶 /s/ Marc   | Adam Affolter   | Date   | Date:                          | 11/15/2017  |
|          |  | Signature of Att   | orney for Debtor  |  | MM / D                         | D / YYYY  |
|          |  |  | am Affolter   |  |                                |   |
|          |  | Printed name   |   |  |                                |   |

IL

State

IL

State

Email address

60603

ZIP Code

ndil@geracilaw.com

Geraci Law L.L.C.

Street

Chicago

6312227

Bar number

55 E. Monroe St., #3400

Contact Phone \_\_312-332-1800

Firm name

Number

City

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| Fill in this information to identify your case: |                     |                                      |                               |  |  |
|---|---------------------|--------------------------------------|-------------------------------|--|--|
| Debtor 1  | Bessie              | M                                    | Cain                          |  |  |
|   | First Name          | Middle Name                          | Last Name                     |  |  |
| Debtor 2  |                     |                                      |                               |  |  |
| (Spouse, if filing)                             | First Name          | Middle Name                          | Last Name                     |  |  |
| United States                                   | Bankruptcy Court fo | or the : <u>NORTHERN</u> District of | f_ <u>ILLINOIS</u><br>(State) |  |  |
| Case Number<br>(If known)                       | Г                   |                                      |                               |  |  |

### Official Form 106Sum

#### **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Par | Summarize Your Assets   |                                      |
|-----|---|--------------------------------------|
|     |   | Your assets<br>Value of what you own |
|     | Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B   | \$ 102,000                           |
| 1   | 1b. Copy line 62, Total personal property, from Schedule A/B  | \$ 23,950                            |
| 1   | 1c. Copy line 63, Total of all property on <i>Schedule A/B</i>  | \$ 125,950                           |
|     |   |                                      |
| Par | Summarize Your Liabilities  |                                      |
|     |   | Your liabilities<br>Amount you owe   |
|     | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$110,121                            |
|     | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  Ba. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F                          | \$0                                  |
| 3   | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F   | \$48,828                             |
|     |   |                                      |
| Pan | Summarize Your Liabilities  |                                      |
|     | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I   | \$2,633.00                           |
|     | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J   | \$2,627.00                           |
|     |   |                                      |

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Document М Bessie Case Number (if known) \_ Debtor 1 First Name Middle Name Last Name

| Pai         | Answer These Questions for Administrative and Statistical Records   |         |  |  |  |  |  |
|-------------|---|---------|--|--|--|--|--|
| 6. <i>i</i> | Are you filing for bankruptcy under Chapter 7, 11 or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.  Yes   |         |  |  |  |  |  |
| 7. \        | <ul> <li>What kind of debt do you have?</li> <li>Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.</li> <li>Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.</li> </ul> |         |  |  |  |  |  |
|             | From the Statement of Your Current Monthly Income: Copy your total current monthly income from C Form 122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.   | \$ 0.00 |  |  |  |  |  |
| 9. (        | . Copy the following special categories of claims from Part 4, line 6 of <i>Schedule E/F</i> :  Total claim   |         |  |  |  |  |  |
|             | From Part 4 of Schedule E/F, copy the following:  |         |  |  |  |  |  |
|             | 9a. Domestic support obligations (Copy line 6a.)  | \$_0.00 |  |  |  |  |  |
|             | 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)   | \$_0.00 |  |  |  |  |  |
|             | 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)   | \$_0.00 |  |  |  |  |  |
|             | 9d. Student loans. (Copy line 6f.)  | \$_0.00 |  |  |  |  |  |
|             | 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)  | \$_0.00 |  |  |  |  |  |
| ,           | 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)  | \$_0.00 |  |  |  |  |  |
| ,           | 9g. <b>Total.</b> Add lines 9a through 9f.  | \$_0.00 |  |  |  |  |  |

| III III IIII III I                     | information to identif      | y your case and this fill                           | Filed 11/15/17 Entered 11 of 5  |   |
|--|-----------------------------|---|---|---|
| Debtor 1                               | Bessie                      | М   | Cain  |   |
|  | First Name                  | Middle Name   | Last Name   |   |
| Debtor 2<br>Spouse, if filing)         | First Name                  | Middle Name   | Last Name   |   |
| spouse, ir tiling)                     | First Name                  | Middle Name   | Last Name   |   |
| Inited State                           | es Bankruptcy Court for the | he : <u>NORTHERN</u> Distri                         | ict of <u>ILLINOIS</u> (State)  |   |
| Case Numb                              | er                          |   |   | Check if this is an   |
| If known)                              |                             |   |   | amended filing  |
| ficial F                               | orm 106A/E                  | 3   |   |   |
| hedu                                   | le A/B: Prop                | nertv   |   | 12/1  |
|  |                             | information. If more spa<br>number (if known). Ansv | ace is needed, attach a separate sheet to this forn wer every question.   | n. On the top of any additional   |
| art 1:                                 | Describe Each Reside        | ence, Building, Land, or C                          | Other Real Esate You Own or Have an Interest In   |   |
| No.                                    | own or nave any legal       | l or equitable interest in                          | n any residence, building, land, or similar propert   | y?  |
| No. Yes                                | s. Describe                 |   | What is the property? Check all that apply.  Single-family home   | Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D:  Creditors Who Have Claims Secured by Property  |
| No. Yes                                | s. Describe                 |   | What is the property? Check all that apply.   | Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property  Current value of the Current value of the  |
| No. Yes                                | s. Describe                 |   | What is the property? Check all that apply.  Single-family home  Duplex or multi-unit building  | Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property   |
| No. Yes                                | s. Describe                 | er description                                      | What is the property? Check all that apply.  Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home  Land  | Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property  Current value of the entire property?  Current value of the portion you own?   |
| No. Yes  1824 Jo                       | s. Describe                 | er description                                      | What is the property? Check all that apply.  Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property   | Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property  Current value of the entire property?  Current value of the portion you own?   |
| No. Yes  1824 Jo Street add  Zion City | s. Describe                 | er description                                      | What is the property? Check all that apply.  Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare   | Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property  Current value of the entire property?  Current value of the portion you own?   |
| No. Yes  1824 Jo Street add            | s. Describe                 | er description                                      | What is the property? Check all that apply.  Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property   | Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property  Current value of the entire property?  \$ 102,000.00 \$ 51,000.00  Describe the nature of your ownership interest (such as fee simple, tenancy by  |
| No. Yes  1824 Jo Street add  Zion City | s. Describe                 | er description                                      | What is the property? Check all that apply.  Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare   | Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D: Creditors Who Have Claims Secured by Property</i> Current value of the entire property?  Current value of the portion you own?  \$ 102,000.00 \$ 51,000.0  Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estat), if known.  |
| No. Yes  1824 Jo Street add  Zion City | s. Describe                 | er description                                      | What is the property? Check all that apply.  Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other   | Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D: Creditors Who Have Claims Secured by Property</i> Current value of the entire property?  Current value of the portion you own?  \$ 102,000.00 \$ 51,000.0  Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estat), if known.  |
| No. Yes  1824 Jo Street add  Zion City | s. Describe                 | er description                                      | What is the property? Check all that apply.  Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check on                             | Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property  Current value of the entire property?  |
| No. Yes  1824 Jo Street add  Zion City | s. Describe                 | er description                                      | What is the property? Check all that apply.  Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home  Land Investment property Timeshare Other Who has an interest in the property? Check on Debtor 1 only              | Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D: Creditors Who Have Claims Secured by Property</i> Current value of the entire property?  Current value of the portion you own?  \$ 102,000.00 \$ 51,000.00  Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estat), if known. |
| No. Yes  1824 Jo Street add  Zion City | s. Describe                 | er description                                      | What is the property? Check all that apply.  Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check on Debtor 1 only Debtor 2 only | Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property  Current value of the Current value of the entire property? portion you own?  \$ 102,000.00 \$ 51,000.00  Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estat), if known.        |

Official Form 106A/B Record # 755252 Schedule A/B: Property Page 1 of 7

\$51,000.00

2. Add the dollar value of the portion you own for all of your entries fro Part 1, including any entries for pages

you have attached for Part 1. Write that number here ..... -->

| Desc | Main |
|------|------|
|      |      |

| Debtor 1 | Bessie     | Case 17-34252 | Doc 1 | Filed 11/15/17        | Entered 11/15/17 16:04:02<br>Page 11 of 55 umber (if known) |
|----------|------------|---------------|-------|-----------------------|---|
|          | First Name | Middle Name   |       | Döcument<br>Last Name | Page 11 01 55   |

| Part 2:      | Describe Your Veh                    | icles   |   |   |  |
|--------------|--------------------------------------|---|---|---|--|
| -            |                                      | -   | any vehicles, whether they are registered or not? Include any also report it on Schedule G: Executory Contracts and Unexpire. |   |  |
| 03. Cars, va |                                      | , sport utility vehicles, mo  | otorcycles  |   |  |
| Yes          | Make:                                | Buick<br>Century  | Who has an interest in the property? Check one.  Debtor 1 only  |   | claims or exemptions. Put red claims on Schedule D:                                |
|              | Model:<br>Year:                      | 1998  | Debtor 2 only  Debtor 1 and Debtor 2 only   | Creditors Who Have Classification Current value of the entire property? | aims Secured by Property  Current value of the portion you own?                    |
|              | Approximate Milea Other information: | ge: <u>65,000</u>   | At least one of the debtors and another   | \$2,000.  |  |
|              | 1998 Buick Centur miles.             | ry with over 65,000   | Check if this is community property (see instructions)  |   |  |
|              | Make:<br>Model:                      | Mitsubishi<br>Lancer  | Who has an interest in the property? Check one.  Debtor 1 only  | the amount of any secu  | claims or exemptions. Put<br>red claims on Schedule D:<br>aims Secured by Property |
|              | Year: Approximate Milea              | 2010<br>ge: 50,000  | Debtor 2 only Debtor 1 and Debtor 2 only  | Current value of the entire property?                                   | Current value of the portion you own?  |
|              | Other information:                   | ancer with over 50,000  | At least one of the debtors and another  Check if this is community property (see   | \$19,150.   | 9,575.00   |
|              | es: Boats, trailers, moto            |   | ecreational vehicles, other vehicles, and accessories yessels, snowmobiles, motorcycle accessories                            |   |  |
|              | -                                    | -   | vour entries fro Part 2, including any entries for pages  |   | \$ 10,575.00   |
| Part 3:      | Describe Your Pers                   | sonal and Household Items   |   |   |  |
| Do you own   | or have any legal c                  | or equitable interest in any  | y of the following items?   |   | Current value of the portion you own? Do not deduct secured claims or exemptions   |
| Example      |                                      | ishings<br>ırniture, linens, china, kitchenw                        | vare  |   |  |
| Yes          |                                      | Furniture, linens, small applia                                     | nces, table & chairs, bedroom set   | \$1,000   | \$1,000. <u>0</u> 0  |
|              | es: Televisions and radi             | ios; audio, video, stereo, and c<br>including cell phones, cameras  | digital equipment; computers, printers, scanners; music<br>, media players, games   |   |  |
| Yes          | s. Describe                          | TVs   |   | \$300   | \$300.00   |
| Example      | coin, or baseball card co            | nes; paintings, prints, or other a ollections; other collections, m | artwork; books, pictures, or other art objects;<br>emorabilia, collectibles   |   |  |
| Ye           | s. Describe                          |   |   |   | \$0.00   |

Bessie

Case 17-34252

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Desc Main

First Name

Middle Name

Document Last Name

|     | Examples:  |   | hobbies hic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes musical instruments   |       |   |
|-----|--|---|---|-------|---|
|     | No. Yes.   | Describe  |   |       | \$0.00  |
| 10. | Examples:  | Pistols, rifles, sho  | tguns, ammunition, and related equipment  |       |   |
|     | Yes.   | Describe  |   |       | \$0.00  |
| 11. | Examples:  | Everyday clothes,   | furs, leather coats, designer wear, shoes, accessories  |       |   |
|     | Yes.   | Describe  | Everyday clothes  | \$100 | \$ 100.00   |
| 12. | Jewelry Examples: gold, silver No.   | Everyday jewelry,   | costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,  |       | <u> </u>  |
|     | Yes.   | Describe  | Everyday jewelry, costume jewelry, wedding ring   | \$400 | \$400.00  |
| 13. | Non-farm a Examples:   | animals<br>Dogs, cats, birds,   | horses  |       |   |
|     | Yes.   | Describe  |   |       | \$0.00  |
| 14. | Any other No.  | personal and h  | ousehold items you did not already list, including any health aids you did not list   |       |   |
|     | Yes.   | Describe  |   |       | \$0.00  |
|     |  |   | of your entries from Part 3, including any entries for pages you have attached  |       | \$1,800.00  |
|     |  | Describe Your Fi  |   |       |   |
| Do  | you own o  | r have any lega   |   |       |   |
| 16. |  |   | l or equitable interest in any of the following?  |       | Current value of the portion you own? Do not deduct secured claims or exemptions                |
|     | Cash<br>Examples:  | Money you have i  | n your wallet, in your home, in a safe deposit box, and on hand when you file your petition   |       | portion you own? Do not deduct secured claims   |
|     |  | Money you have i  |   |       | portion you own? Do not deduct secured claims or exemptions                                     |
| 17. | Examples: No. Yes.  Deposits of Examples:  | Describe of money Checking, savings   |   |       | portion you own? Do not deduct secured claims   |
| 17. | No. Yes.  Deposits of Examples: and other s  | Describe of money Checking, savings   | n your wallet, in your home, in a safe deposit box, and on hand when you file your petition s, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses,   |       | portion you own?  Do not deduct secured claims or exemptions  \$                                |
|     | Examples: No. Yes.  Deposits of Examples: and other signs of Yes.  Bonds, mu Examples:       | Describe of money Checking, savings similar institutions. Describe  | n your wallet, in your home, in a safe deposit box, and on hand when you file your petition  s, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, If you have multiple accounts with the same institution, list each.  Account Type: Institution name:   | _     | portion you own? Do not deduct secured claims or exemptions  \$                                 |
|     | Examples: No. Yes.  Deposits of Examples: and other some Yes.  Bonds, mo                     | Describe of money Checking, savings similar institutions. Describe  | n your wallet, in your home, in a safe deposit box, and on hand when you file your petition  s, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses,  If you have multiple accounts with the same institution, list each.  Account Type:  Checking Account  PNC  publicly traded stocks   |       | portion you own?  Do not deduct secured claims or exemptions  \$ 0.00  \$ 1,000.00  \$ 1,000.00 |
| 18. | Examples: No. Yes.  Deposits of Examples: and other s No. Yes.  Bonds, mu Examples: No. Yes. | Describe  of money  Checking, savings similar institutions.  Describe  utual funds, or p  Bond funds, inves  Describe | n your wallet, in your home, in a safe deposit box, and on hand when you file your petition  s, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, if you have multiple accounts with the same institution, list each.  Account Type: Institution name: Checking Account PNC  publicly traded stocks tment accounts with brokerage firms, money market accounts |       | portion you own?  Do not deduct secured claims or exemptions  \$ 0.00  \$ 1,000.00  \$ 1,000.00 |

Case 17-34252 Doc 1 Bessie

First Name

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Document Page 13 of a B S umber (if known)

Page 13 of a B S umber (if known) Desc Main Document Last Name 20. Government and corporate bonds and other negotiable and non-negotiable instruments

|     | -            |                                       | e personal checks, cashiers' checks, promissory notes, and money orders. re those you cannot transfer to someone by signing or delivering them.               |   |          |
|-----|--------------|---------------------------------------|---|---|----------|
|     | Yes.         | Describe                              | Issuer name:  | \$  | 0.00     |
| 21. | Retirement   | or pension acc                        | counts  |   |          |
|     | Examples: I  | nterests in IRA, EF                   | RISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans  |   |          |
|     | Yes.         | Describe                              | Type of account and Institution name:   | \$  | 0.00     |
| 22. | Security de  | posits and prep                       | payments  |   |          |
|     |              |                                       | sits you have made so that you may continue service or use from a company andlords, prepaid rent, public utilities (electric, gas, water), telecommunications |   |          |
|     | Yes.         | Describe                              | Institution name or individual:   | \$  | 0.00     |
| 23. | Annuities (  | A contract for a                      | periodic payment of money to you, either for life or for a number of years)   |   |          |
|     | Yes.         | Describe                              | Issuer name and description:  |   |          |
| 24. | 26 U.S.C. §  | an education II<br>§ 530(b)(1), 529A( | RA, in an account in a qualified ABLE program, or under a qualified state tuition program.<br>(b), and 529(b)(1).   | \$  | 0.00     |
|     | No.          |                                       |   |   |          |
|     | Yes.         | Describe                              | Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):  | •   | 0.00     |
| 25. | Trusts, equ  | itable or future                      | interests in property (other than anything listed in line 1), and rights or powers  | \$  | 0.00     |
|     | Yes.         | Describe                              |   |   |          |
|     |              |                                       |   | \$  | 0.00     |
| 26. |              |                                       | marks, trade secrets, and other intellectual property mes, websites, proceeds from royalties and licensing agreements   |   |          |
|     | Yes.         | Describe                              |   | \$  | 0.00     |
| 27. |              |                                       | other general intangibles  xclusive licenses, cooperative association holdings, liquor licenses, professional licenses  |   |          |
|     | Yes.         | Describe                              |   | \$  | 0.00     |
| Mor | ney or prope | erty owed to you                      | u?  | Current value of the portion you own? Do not deduct secured or exemptions |          |
| 28. |              | s owed to you                         |   |   |          |
|     | No.          | Doocsiba                              |   |   |          |
|     | Yes.         | Describe                              |   | \$  | 0.00     |
| 29. | Family sup   | port                                  |   | *   |          |
|     | Examples: F  | Past due or lump s                    | um alimony, spousal support, child support, maintenance, divorce settlement, property settlement  |   |          |
|     | Yes.         | Describe                              |   | ÷   | 0.00     |
| 30. | Other amou   | unts someone o                        | owes vou  | \$  | <u> </u> |
|     |              |                                       | ability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation,   |   |          |
|     | No.          |                                       | id loans you made to someone else   |   |          |
|     | Yes.         | Describe                              |   | •   | 0.00     |
|     |              |                                       |   | \$  | 0.00     |

Bessie

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Desc Main

First Name Middle Name Document Last Name

| 31. | Interest in   | insurance polic  | ies  |                    |            |
|-----|---|--|--|--------------------|------------|
|     | Examples: I   | Health, disability, o                                  | r life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance                       |                    |            |
|     | No.   |  | Company Name & Beneficiary:  |                    |            |
|     | Yes.  | Describe   |  |                    |            |
|     |   |  |  | \$                 | 0.00       |
| 32. | Any interes   | st in property th                                      | at is due you from someone who has died  |                    |            |
|     | -   | -  | living trust, expect proceeds from a life insurance policy, or are currently entitled to receive                 |                    |            |
|     |   | cause someone ha                                       | is died.   |                    |            |
|     | No.   |  |  |                    |            |
|     | Yes.  | Describe   |  |                    |            |
|     |   |  |  | \$                 | 0.00       |
| 33. | _   | -  | s, whether or not you have filed a lawsuit or made a demand for payment  |                    |            |
|     |   | Accidents, employ                                      | ment disputes, insurance claims, or rights to sue  |                    |            |
|     | No.   |  |  |                    |            |
|     | Yes.  | Describe   |  |                    |            |
|     |   |  |  | \$                 | 0.00       |
| 34. |   | ingent and unli  | quidated claims of every nature, including counterclaims of the debtor and rights                                |                    |            |
|     | No.   |  |  |                    |            |
|     | Yes.  | Describe   |  |                    |            |
|     |   |  |  | \$                 | 0.00       |
| 35. | Any financ  | ial assets you d                                       | lid not already list   |                    |            |
|     | No.   |  |  |                    |            |
|     | Yes.  | Describe   |  |                    |            |
|     |   |  |  | \$                 | 0.00       |
|     |   |  |  |                    |            |
| 36. | Add the do  | llar value of all                                      | of your entries from Part 4, including any entries for pages you have attached                                   |                    |            |
|     | for Part 4. V   | Write that numbe                                       | er here>   |                    | \$1,000.00 |
|     |   |  |  |                    |            |
|     | art 5:  | escribe Any Bus  | iness-Related Property You Own or Have an Interest In. List any real estate in Part 1.                           |                    |            |
|     |   | n or have any le                                       | gal or equitable interest in any business-related property?  |                    |            |
| ٥,, | No.   | ii oi nave any ie                                      | gui of equitable interest in any business-related property.  |                    |            |
|     | =   |  |  |                    |            |
|     | Yes.  |  |  |                    |            |
|     |   |  |  | Current value of   | the        |
|     |   |  |  | portion you own    |            |
|     |   |  |  | Do not deduct secu | ed claims  |
|     |   |  |  | or exemptions      |            |
| 38. |   | receivable or co                                       | mmissions you already earned   |                    |            |
|     | No.   |  |  |                    |            |
|     | Yes.  | Describe   |  |                    |            |
|     |   |  |  | \$                 | 0.00       |
| 39. | Office equi   | ipment, furnishi                                       | ngs, and supplies  |                    |            |
|     | Examples: I   | Business-related c                                     | omputers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices |                    |            |
|     | No.   |  |  |                    |            |
|     | Yes.  |  |  |                    |            |
|     |   | Describe   |  |                    |            |
| 40. |   | Describe   |  | \$                 | 0.00       |
|     | _   |  | ment, supplies you use in business, and tools of your trade  | \$                 | 0.00       |
|     | _   |  | ment, supplies you use in business, and tools of your trade  | \$                 | 0.00       |
|     | Machinery,  | , fixtures, equip                                      | nent, supplies you use in business, and tools of your trade  | \$                 | 0.00       |
|     | Machinery,  |  | nent, supplies you use in business, and tools of your trade  | \$<br>\$           | 0.00       |
| 41. | Machinery, No. Yes.   | , fixtures, equip                                      | ment, supplies you use in business, and tools of your trade  | \$<br>\$           |            |
| 41. | Machinery, No. Yes.   | , fixtures, equip                                      | ment, supplies you use in business, and tools of your trade  | \$<br>\$           |            |
| 41. | Machinery, No. Yes. Inventory No.                                       | , fixtures, equip                                      | ment, supplies you use in business, and tools of your trade  | \$<br>\$           |            |
| 41. | Machinery, No. Yes.   | , fixtures, equip                                      | ment, supplies you use in business, and tools of your trade  | \$                 | 0.00       |
|     | Machinery, No. Yes.  Inventory No. Yes.                                 | Describe   |  | \$<br>\$           |            |
|     | Machinery, No. Yes.  Inventory No. Yes.  Interests in                   | Describe  Describe                                     | r joint ventures   | \$                 | 0.00       |
|     | Machinery, No. Yes. Inventory No. Yes. Interests in No.                 | Describe  Describe                                     |  | \$                 | 0.00       |
|     | Machinery, No. Yes.  Inventory No. Yes.  Interests in                   | Describe  Describe                                     | r joint ventures   | \$                 | 0.00       |
| 42. | Machinery, No. Yes. Inventory No. Yes. Interests in No. Yes.            | Describe  Describe  Describe  Describe                 | r joint ventures  Name of Entity and Percent of Ownership:   | \$                 | 0.00       |
| 42. | Machinery, No. Yes. Inventory No. Yes. Interests in No. Yes. Customer I | Describe  Describe  partnerships of Describe           | r joint ventures   | \$                 | 0.00       |
| 42. | Machinery, No. Yes. Inventory No. Yes. Interests in No. Yes.            | Describe  Describe  partnerships of Describe  Describe | r joint ventures  Name of Entity and Percent of Ownership:   | \$                 | 0.00       |
| 42. | Machinery, No. Yes. Inventory No. Yes. Interests in No. Yes. Customer I | Describe  Describe  partnerships of Describe           | r joint ventures  Name of Entity and Percent of Ownership:   | \$                 | 0.00       |

44. Any business-related property you did not already list Nο Describe..... 0.00 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached \$ 0.00 for Part 5. Write that number here ..... Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Yes. Describe..... 0.00 47. Farm animals Examples: Livestock, poultry, farm-raised fish No. Describe..... 0.00 48. Crops-either growing or harvested No. Yes. Describe..... 0.00 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade No. Yes. Describe..... 0.00 50. Farm and fishing supplies, chemicals, and feed Yes. Describe..... 0.00 51. Any farm- and commercial fishing-related property you did not already list Yes Describe..... 0.00 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached \$0.00 for Part 6. Write that number here ----Describe All Property You Own or Have an Interest in That You Did Not List Above Part 7: 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No. Describe..... Yes. 0.00 \$0.00 54. Add the dollar value of all of your entries from Part 7. Write that number here ...... -->

Case 17-34252 Bessie

Doc 1

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Desc Main

First Name

<del>Döcument</del>

List the Totals of Each Part of this Form Part 8: \$51,000.00 55. Part 1: Total real estate, line 2 \$ 10,575.00 56. Part 2: Total vehicles, line 5 \$ 1,800.00 57. Part 3: Total personal and household items, line 15 \$ 1,000.00 58. Part 4: Total financial assets, line 36 \$ 0.00 59. Part 5: Total business-related property, line 45 \$ 0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$ 0.00 61. Part 7: Total other property not listed, line 54 \$ 13,375.00 \$ 13,375.00 62. Total personal property. Add lines 56 through 61. ..... 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$64,375.00 Case 17-34252 Doc 1 Filed 11/15/17 Entered 11/15/17 16:04:02 Desc Main

| Fill in this information to identify your case: |                      |                                     |                 |  |  |  |
|---|----------------------|-------------------------------------|-----------------|--|--|--|
| Debtor 1  | Bessie               | М                                   | Cain            |  |  |  |
|   | First Name           | Middle Name                         | Last Name       |  |  |  |
| Debtor 2  |                      |                                     |                 |  |  |  |
| (Spouse, if filing)                             | First Name           | Middle Name                         | Last Name       |  |  |  |
| United States                                   | Bankruptcy Court for | the : <u>NORTHERN</u> District of _ | ILLINOIS(State) |  |  |  |
| Case Number                                     | r                    |                                     | _               |  |  |  |
| (If known)                                      |                      |                                     |                 |  |  |  |

# Official Form 106C

#### Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions-such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds-may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| 1. Which set of exc        | emptions are you claiming? Check  | one only, even if your spo   | ouse is filing with you.  |                                    |  |  |  |  |  |
|----------------------------|---|--|---|------------------------------------|--|--|--|--|--|
| You are clair              | You are claiming state and federal nonbankruptcy exemptions . 11 U.S.C. § 522(b)(3) |  |   |                                    |  |  |  |  |  |
| You are clair              | You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)                          |  |   |                                    |  |  |  |  |  |
|                            |   |  |   |                                    |  |  |  |  |  |
| 2. For any property        | y you list on Schedule A/B that you   | u claim as exempt, fill in t   | he information below.   |                                    |  |  |  |  |  |
|                            | n of the property and line on hat lists this property                               | Current value of the Amount of the exemption you claim portion you own |   | Specific laws that allow exemption |  |  |  |  |  |
|                            |   | Copy the value from<br>Schedule A/B                                    | Check only one box for each exemption                           |                                    |  |  |  |  |  |
| Brief<br>description:      | 1824 Joppa Ave. Zion IL 60099 -<br>Primary Residence                                | \$ <u>102,000</u>  | \$15,000  | 735 ILCS 5/12-901                  |  |  |  |  |  |
| Line from<br>Schedule A/B: | 01  |  | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |  |  |  |
| Brief<br>description:      | 2010 Mitsubishi Lancer with over 50,000 miles                                       | \$_ 9,575  | \$_1,500  | 735 ILCS 5/12-1001(b)              |  |  |  |  |  |
| Line from Schedule A/B:    | 03  |  | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |  |  |  |
| Brief description:         | 1998 Buick Century with over 65,000 miles.  | \$_1,000   | \$2,400   | 735 ILCS 5/12-1001(c)              |  |  |  |  |  |
| Line from Schedule A/B:    | 03  |  | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |  |  |  |
| Brief<br>description:      | Furniture, linens, small appliances, table & chairs, bedroom set                    | \$_1,000   | \$_1,000  | 735 ILCS 5/12-1001(b)              |  |  |  |  |  |
| Line from Schedule A/B:    | 06  |  | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |  |  |  |
|                            |   |  |   |                                    |  |  |  |  |  |
| Official Form 106C         | Record # 755252   | Schedule C: T  | he Property You Claim as Exempt                                 | Page 1 of 2                        |  |  |  |  |  |

Case 17-34252 Doc 1 Filed 11/15/17

Bessie Μ

Middle Name

Document

Entered 11/15/17 16:04:02 Desc Main Page 18 of 55 Number (if known)

Debtor 1

Part 2:

Additional Page

Last Name

Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption Schedule A/B TVs 735 ILCS 5/12-1001(b) Brief \$ 300 \$ 300 description: Line from 100% of fair market value, up to 07 Schedule A/B: any applicable statutory limit Everyday clothes 735 ILCS 5/12-1001(a),(e) Brief \$ 100 100 description: 100% of fair market value, up to Line from any applicable statutory limit Schedule A/B: Brief Everyday jewelry, costume 735 ILCS 5/12-1001(a),(e) \$ 400 \$ 400 jewelry, wedding ring description: 735 ILCS 5/12-1001(b) Line from 100% of fair market value, up to 12 Schedule A/B: any applicable statutory limit Brief Checking Account, PNC, 1,000.00 735 ILCS 5/12-1001(b) \$ 1,000 \$ 1,000 description: Line from 100% of fair market value, up to 17 Schedule A/B: any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$155,675? (Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? ☐ No ☐ Yes. 755252 Official Form 106C Record # Schedule C: The Property You Claim as Exempt Page 2 of 2

|                                 | Caso 17                                   |                            | 1 Filod 11/15/17  | Entered 11/15/1               | 7 16:04:02                            | Desc Main                     |                          |
|---------------------------------|---|----------------------------|---|-------------------------------|---------------------------------------|-------------------------------|--------------------------|
| Fill in this in                 | formation to ident                        | ify your case:             |   | 9 of 55                       |                                       |                               |                          |
| Debtor 1                        | Bessie                                    | M                          | Cain  |                               |                                       |                               |                          |
|                                 | First Name                                | Middle Name                | Last Name   |                               |                                       |                               |                          |
| Debtor 2<br>(Spouse, if filing) | First Name                                | Middle Name                | Last Name   |                               |                                       |                               |                          |
| United States                   | Bankruptcy Court for                      | the : <u>NORTHERN</u>      | District of <u>ILLINOIS</u>   |                               |                                       |                               |                          |
| Case Number                     |   |                            | (State)   |                               |                                       | Check if this                 | s is an                  |
| (If known)                      |   |                            |   |                               |                                       | amended fi                    | ling                     |
| Official F                      | orm 106D                                  |                            |   |                               |                                       |                               |                          |
| Schedule                        | D: Credito                                | rs Who Have                | Claims Secured by F   | Property                      |                                       |                               | 12/1                     |
| Be as complete                  | and accurate as p                         | oossible. If two marri     | ed people are filing together, both<br>onal Page, fill it out, number the er      | are equally responsible fo    |                                       | ny                            |                          |
|                                 | •   | s secured by your pro      | •   |                               |                                       |                               |                          |
|                                 |   |                            | court with your other schedules. Yo   | ou have nothing else to repor | t on this form.                       |                               |                          |
|                                 | I in all of the inform                    |                            |   | 3                             |                                       |                               |                          |
|                                 |   |                            |   |                               |                                       |                               |                          |
| Part 1:                         | List All Secured Cla                      | lims                       |   |                               | Caluman A                             | Caluman A                     | Caluman C                |
| 2. List all se                  | cured claims. If a                        | creditor has more that     | n one secured claim, list the credito   | r separately                  | Column A  Amount of claim             | Column A  Value of collateral | Column C Unsecured       |
|                                 |   | •                          | rticular claim, list the other creditors<br>I order according to the creditors na |                               | Do not deduct the value of collateral | that supports this claim      | <b>portion</b><br>If any |
| 2.1 Baxter                      | Credit Union                              |                            | Describe the property that secure   | es the claim:                 | <b>\$</b> _17,012.00                  | <b>\$</b> 19,150.00           | \$ 0.00                  |
| Creditor's                      |   |                            | 2010 Mitsubishi Lancer with ove   | r 50,000 miles                |                                       |                               |                          |
| 400 Nor                         | th Lakeview Parky Street                  | <i>V</i>                   |   |                               |                                       |                               |                          |
|                                 |   |                            | As of the date you file, the claim  | is: Check all that apply.     | _                                     |                               |                          |
| Vernon                          | Lillo                                     | II 60064                   | Contingent  |                               |                                       |                               |                          |
| City                            | TIIIS                                     | IL 60061<br>State Zip Code | Unliquidated  |                               |                                       |                               |                          |
| Who owes                        | the debt? Check or                        | 10                         | Disputed  Nature of Lien. Check all that apply                                    | ,                             |                                       |                               |                          |
| Debtor                          |   | ic.                        | An agreement you made (such as  |                               |                                       |                               |                          |
| Debtor                          | 2 only                                    |                            | car loan)   |                               |                                       |                               |                          |
|                                 | 1 and Debtor 2 only                       | 0                          | Statutory lien (such as tax lien, m   | nechanic's lien)              |                                       |                               |                          |
| At least                        | one of the debtors ar                     | id another                 | Judgment lien from a lawsuit  Other (including a right to offset)                 |                               |                                       |                               |                          |
|                                 | if this claim relates<br>unity debt       | to a                       |   |                               |                                       |                               |                          |
|                                 | -   | 2014-09-11                 | Last 4 digits of account number   | <u>8351</u>                   |                                       |                               |                          |
| 2.2 Seteru                      | INC                                       |                            | Describe the property that secure   | es the claim:                 | \$_93,109.00                          | <b>\$</b> _102,000.00         | \$ <u>0.00</u>           |
| Creditor's                      |   |                            | 1824 Joppa Ave. Zion IL 60099   | - Primary Residence           |                                       |                               |                          |
| Number                          | Sw Millikan Way St<br>Street              |                            |   |                               |                                       |                               |                          |
|                                 |   |                            | As of the date you file, the claim  | is: Check all that apply.     | _                                     |                               |                          |
| Beavert                         | on  | OR 97005                   | Contingent  |                               |                                       |                               |                          |
| City                            |   | State Zip Code             | Unliquidated  |                               |                                       |                               |                          |
| Who owes                        | the debt? Check or                        | ne.                        | Disputed  Nature of Lien. Check all that apply                                    | v                             |                                       |                               |                          |
| Debtor                          |   |                            | An agreement you made (such as  |                               |                                       |                               |                          |
| Debtor :                        | •   |                            | car loan)   |                               |                                       |                               |                          |
| =                               | 1 and Debtor 2 only one of the debtors ar | nd another                 | Statutory lien (such as tax lien, m  Judgment lien from a lawsuit                 | echanic's lien)               |                                       |                               |                          |
| At least                        | One or the deplois at                     | ia anound                  | Other (including a right to offset)   |                               |                                       |                               |                          |
|                                 | if this claim relates<br>unity debt       | to a                       | <del>-</del>  |                               |                                       |                               |                          |
|                                 |   | 2012-2017                  | Last 4 digits of account number   | 9372                          |                                       |                               |                          |
| Add the d                       | ollar value of you                        | r entries in Column A      | A on this page. Write that number   | here:                         | \$ <u>110,121.00</u>                  |                               |                          |

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Bessie Debtor 1

**Document** 

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Part 2:

List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Add the dollar value of your entries in Column A on this page. Write that number here:

\$<u>110,121.00</u>

|   |   | Caso 17 2/252   | Doc 1  | 1 Filod  | 11/15/17   | Entor  | ed 11/15/17 16   | 6:04:02   | Desc Main                 |                     |
|---|---|---|--|--|--|--|--|---|---------------------------|---------------------|
| Fill in   | this inf  | ormation to identify your cas   |  |  |  |  | 1 of 55  |   |                           |                     |
| Debto   | r 1   | Bessie  | М  |  | Cain   |  |  |   |                           |                     |
|   |   | First Name N  | Middle Name  |  | Last Name  |  |  |   |                           |                     |
| Debto<br>(Spouse                                      |   | First Name N  | Middle Name  |  | Last Name  |  |  |   |                           |                     |
|   |   |   |  |  |  |  |  |   |                           |                     |
| United  | l States E  | Bankruptcy Court for the : <u>NOR</u>   | <u>THERN</u> Dist  | trict of <u>ILLINOI</u>  | S(State)   |  |  |   |                           | a                   |
| Case (If know   | Number <sub>.</sub><br>wn)                              |   |  |  |  |  |  |   | Check if t                |                     |
| Offici  | al Ed   | orm 106E/F  |  |  |  |  | •  |   | amended                   | illing              |
|   |   | E/F: Creditors Wh   |  |  |  |  |  |   |                           | 12/15               |
| ist the o<br>/ <i>B: Prop</i><br>reditors<br>eeded, o | other pa<br>perty (C<br>with pa<br>copy the<br>y additi | and accurate as possible. Us<br>rty to any executory contract<br>official Form 106A/B) and on a<br>artially secured claims that ar<br>e Part you need, fill it out, nu<br>onal pages, write your name<br>ist All of Your PRIORITY Unsec | ts or unexpi Schedule G: re listed in S imber the en and case no | red leases the<br>Executory C<br>Schedule D: C<br>Itries in the bo | at could result in a<br>contracts and Une<br>creditors Who Have<br>oxes on the left. A | a claim. Als<br>expired Leave<br>ve Claims S   | so list executory contra<br>ses (Official Form 1060<br>Secured by Property. If         | ncts on Schedul<br>3). Do not includ<br>more space is | le                        |                     |
| 1. <b>Do a</b>  | ny cred   | litors have priority unsecured  | d claims aga   | inst you?  |  |  |  |   |                           |                     |
| =   | No. Go  | to Part 2.  |  |  |  |  |  |   |                           |                     |
|   | res.  |   | . If a aradita   | r has mare the   | n one priority une   | a aurad alai                                   | m list the graditar concr  | entally for anoth al                                  | aim Far                   |                     |
| each<br>nong<br>unse                                  | n claim I<br>priority a<br>ecured o                     | our priority unsecured claims<br>isted, identify what type of clai<br>amounts. As much as possible<br>claims, fill out the Continuation<br>anation of each type of claim,   | im it is. If a cl<br>, list the clair<br>Page of Par             | laim has both<br>ms in alphabe<br>t 1. If more th                  | priority and nonpri<br>tical order accordin<br>an one creditor ho                      | riority amou<br>ing to the cr<br>olds a partic | nts, list that claim here a<br>editor's name. If you hav<br>ular claim, list the other | and show both prove more than two                     | riority and<br>o priority |                     |
| (1 01   | ин схрі   | anation of each type of oldini,   | See the mon  | detions for the  | 3 IOIII III IIIC IIIGUC  | dollori book                                   |  | Total claim   | Priority                  | Nonpriority         |
|   |   | ist All of Your NONPRIORITY U   | Insecured Cla  | aims   |  |  |  |   | amount                    | amount              |
| Part 2  | 1   |   |  |  |  |  |  |   |                           |                     |
| _   | -   | litors have nonpriority unsec   |  | _  |  | r other cohe                                   | oduloo   |   |                           |                     |
| =   | vo. 100<br>res.   | Thave nothing to report in this   | part. Submi  | it tills lottil to t   | ne court with your   | i other sche                                   | cuiles.  |   |                           |                     |
| 4. List a nonp  | all of your   | our nonpriority unsecured cla<br>insecured claim, list the credito<br>Part 1. If more than one credito<br>t the Continuation Page of Pa   | or separately<br>or holds a pa                                   | for each clair   | m. For each claim  | listed, iden                                   | tify what type of claim it   | is. Do not list cla                                   | nims already              |                     |
|   |   | -   |  |  |  |  |  |   |                           | Total claim         |
| 7.1   | reditor's N   |   |  | Last 4 digits o  | f account number   | NULL   | <del>-</del>   |   |                           | \$ <u>20,671.00</u> |
| <u>F</u>  | Po Box 9  | 982238  |  | When was the   | debt incurred?   | 1995   | -2016  |   |                           |                     |
| ٨   | lumber  | Street  |  |  | en   |  |  |   |                           |                     |
| _   |   |   | i  | Contingent   | you file, the claim  | is: Check a                                    | II that apply.   |   |                           |                     |
| _   | I Paso  | TX 7999   |  | Unliquidated   | 1  |  |  |   |                           |                     |
|   | o owes  | State Zip C the debt? Check one.  | ode  | Disputed   |  |  |  |   |                           |                     |
|   | Debtor 1  | •   |  |  |  |  |  |   |                           |                     |
| 님   | Debtor 2  | •   |  | Type of NONP Student loar  | RIORITY unsecure   | ed claim:                                      |  |   |                           |                     |
| =   |   | and Debtor 2 only one of the debtors and another  | ı<br>I   | =  | is<br>arising out of a sepai   | ration agreen                                  | ment or divorce  |   |                           |                     |
| =   |   | f this claim relates to a   |  | _  | not report as priority   | -  | -  |   |                           |                     |
|   |   | nity debt   | [  | Debts to per   | nsion or profit-sharing  | g plans, and                                   | other similar debts  |   |                           |                     |
|   | <b>he claim</b><br>No                                   | subject to offest?  | ı  | Other Car  | ify Credit Card o  | or Credit I le                                 | se   |   |                           |                     |
| $\neg$  | Yes   |   | ı  | Other. Spec  | ily Oredit Gard C  | or Oreun Os                                    |  |   |                           |                     |

Doc 1 Filed 11/15/17 Entered 11/15/17 16:04:02 Desc Main Case 17-34252 Page 22 of 55 Case Number (if known) **Document** Bessie Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim** BK OF AMER \$ 24,743.00 Last 4 digits of account number \_ Creditor's Name 1994-2016 Po Box 982238 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent El Paso TX 79998 Unliquidated City State Zip Code Disputed Who owes the debt? Check one Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offest? No Other. Specify Credit Card or Credit Use Yes CBNA NULL \$ 905.00 Last 4 digits of account number 4.3 Creditor's Name 2005-2016 Po Box 6283 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Sioux Falls 57117 SD Unliquidated State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a Debts to pension or profit-sharing plans, and other similar debts community debt Is the claim subject to offest? No Other. Specify \_\_\_ Credit Card or Credit Use Yes Chase CARD **NULL** \$ 1,813.00 4.4 Last 4 digits of account number Creditor's Name 1997-2017 Po Box 15298 When was the debt incurred? Street Number As of the date you file, the claim is: Check all that apply.

Doc 1 Filed 11/15/17 Entered 11/15/17 16:04:02 Desc Main Case 17-34252 Page 23 of 55 Case Number (if known) **Document** Bessie Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim** Chase MTG \$ 0.00 Last 4 digits of account number Creditor's Name 2006-2010 Po Box 24696 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent OH 43224 Columbus Unliquidated City State Zip Code Disputed Who owes the debt? Check one Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offest? No Other. Specify Notice Only Yes Loancare Servicing CTR 7145 \$ 0.00 Last 4 digits of account number 4.6 2006-2008 3637 Sentara Way When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent 23452 Virginia Beach VA Unliquidated City State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only

Debtor 2 only Type of NONPRIORITY unsecured claim: Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a Debts to pension or profit-sharing plans, and other similar debts community debt Is the claim subject to offest? No Other. Specify Notice Only Yes Nordstrom/TD BANK USA NULL \$ 696.00 4.7 Last 4 digits of account number Creditor's Name 2004-2012 13531 E Caley Ave When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Englewood CO 80111 Unliquidated City State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offest? No Other. Specify \_\_\_Credit Card or Credit Use

Filed 11/15/17 Entered 11/15/17 16:04:02 Desc Main Case 17-34252 Doc 1 Page 24 of 55 **Document** Bessie Debtor 1 First Name \$ 0.00 Quicken Loans 9368 4.8 Last 4 digits of account number Creditor's Name 2012-2012 1050 Woodward Ave When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent 48226 Detroit Unliquidated City State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Student loans Debtor 1 and Debtor 2 only At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offest? Other. Specify Notice Only

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

List Others to Be Notified for a Debt That You Already Listed

Part 3:

Doc 1 Filed 11/15/17 Entered 11/15/17 16:04:02 Desc Main Case 17-34252 Page 25 of 55 Case Number (if known)

Schedule E/F: Creditors Who Have Unsecured Claims

Debtor 1

Bessie

**Document** 

Add the Amounts for Each Type of Unsecured Claim

| 6. Total the amounts of certain types of unsecured claims. This information is for statis Add the amounts for each type of unsecured claim. | stical reporting purposes only. 28 U.S.C. § 159. |
|---|--|
|   | Total claim                                      |
|   | 0.00   |

|                             |   |     | Total claim   |
|-----------------------------|---|-----|---------------|
| Total claims                | 6a. Domestic support obligations  | 6a. | \$0.00        |
|                             | 6b. Taxes and Certain other debts you owe the government  | 6b. | \$0.00        |
|                             | 6c. Claims for death or personal injury while you were intoxicated  | 6c. | \$0.00        |
|                             | 6d. <b>Other.</b> Add all other priority unsecured claims. Write that amount here.                          | 6d. | \$0.00        |
|                             | 6e. <b>Total.</b> Add lines 6a through 6d.  | 6e. | \$0.00        |
|                             |   |     | Total claim   |
| Total claims<br>from Part 2 | 6f. Student loans   | 6f. | \$0.00        |
|                             | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$0.00        |
|                             | 6h. Debts to pension or profit-sharing plans, and other similar debts                                       | 6h. | \$0.00        |
|                             | 6i. <b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.                       | 6i. | \$48,828.00   |
|                             | 6j. <b>Total.</b> Add lines 6f through 6i.  | 6j. | \$\$48,828.00 |

|                          |  | Caso 17   | 7.24252 Doc 1   | 1 Filod 11/15/17   | Entered 11/15/17 16:04:02   | Desc Main           |
|--------------------------|--|---|---|--|---|---------------------|
| Fil                      | ll in this in  | formation to ider   | ntify your case:  |  | 6 of 55   |                     |
| De                       | ebtor 1  | Bessie  | M   | Cain   |   |                     |
| De                       | ebtor 2  | First Name  | Middle Name   | Last Name  |   |                     |
| (Sp                      | oouse, if filing)                                    | First Name  | Middle Name   | Last Name  |   |                     |
| Uı                       | nited States   | Bankruptcy Court fo   | or the : <u>NORTHERN</u> Dist   |  |   |                     |
|                          | ase Number   |   |   | (State)  |   | Check if this is an |
|                          |  | orm 106C  |   |  |   | amended filing      |
|                          |  | orm 106G  |   | and Unexpired Lea  | .coc  | 12/1:               |
| Be as<br>nforn<br>additi | complete nation. If n ional page:  o you hav  No. Ch | and accurate as<br>nore space is ned<br>s, write your name<br>e any executory<br>eck this box and | possible. If two married eded, copy the additional ne and case number (if knoontracts or unexpired lessubmit this form to the countracts. | people are filing together, bot<br>I page, fill it out, number the e<br>nown).<br>eases?<br>urt with your other schedules. Y | h are equally responsible for supplying correction tries, and attach it to this page. On the top of our have nothing else to report on this form. | f any               |
|                          | Yes. Fill  | in all of the infor   | mation below even if the o  | contracts or leases are listed in  | Schedule A/B: Property (Official Form 106A/B)   |                     |
| e                        |  | nt, vehicle lease,  |   |  | e. Then state what each contract or lease is for ruction booklet for more examples of executory   |                     |
|                          | Person or  | company with w  | hom you have the contra   | act or lease   | State what the contract or le   | ase is for          |
| 2.1                      |  |   |   |  | -   |                     |
|                          | Name   |   |   |  | _   |                     |
|                          | Number   | Street  |   |  |   |                     |
|                          | City   |   | Sta   | ate Zip Code   | -   |                     |
| 2.2                      |  |   |   |  |   |                     |
|                          | Name   |   |   |  | -   |                     |
|                          | Number   | Street  |   |  | -   |                     |
|                          | City   |   | Sta   | ate Zip Code   | -   |                     |
| 2.3                      |  |   |   |  | _   |                     |
|                          | Name   |   |   |  |   |                     |
|                          | Number   | Street  |   |  | _   |                     |
|                          | City   |   | Sta   | ate Zip Code   | _   |                     |
| 2.4                      |  |   |   |  |   |                     |
|                          | Name   |   |   |  |   |                     |
|                          | Number   | Street  |   |  | -   |                     |
|                          | City   |   | Sta   | ate Zip Code   | -   |                     |
| 2.5                      |  |   |   |  |   |                     |
|                          | Name   |   |   |  | =   |                     |
|                          | Number   | Street  |   |  | -   |                     |

State Zip Code

City

Official Form 106G

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| Fill in this in     | nformation to ident  |                                     |                     |
|---------------------|----------------------|-------------------------------------|---------------------|
| Debtor 1            | Bessie               | М                                   | Cain                |
|                     | First Name           | Middle Name                         | Last Name           |
| Debtor 2            | -                    |                                     |                     |
| (Spouse, if filing) | First Name           | Middle Name                         | Last Name           |
| United States       | Bankruptcy Court for | the : <u>NORTHERN</u> District of _ | ILLINOIS<br>(State) |
| Case Number         | r                    |                                     | _                   |
| (If known)          |                      |                                     |                     |

# Official Form 106H

Schedule H: Your Codebtors 12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

| any A        | aaition     | iai Pages, write yo       | our name and case number (if known). Answer every   | question.            |   |
|--------------|-------------|---------------------------|---|----------------------|---|
| 1. D         | o you l     | have any codebto          | rs? (If you are filing a joint case, do not list either spous   | e as a codebtor      | .)  |
| Г            | No.         |                           |   |                      |   |
| Ī            | Yes         |                           |   |                      |   |
|              |             | =                         | ave you lived in a community property state or territor<br>Lousiiana, Nevada, New Mexico, Puerto Rico, Texas, V |                      |   |
|              | No.         | Go to line 3.             |   |                      |   |
| -            |             |                           | former spouse, or legal equivalent live with you at the t   | ime?                 |   |
|              |             | No                        | Torrier spouse, or legal equivalent live with you at the t  |                      |   |
|              |             | Yes. Inwhich con          | nmunity state or territory did you live?  | Fill in the          | e name and current address of that person.      |
|              |             |                           |   |                      |   |
|              |             | Name of your spouse, for  | ormer spouse or legal equivalent  | <del></del>          |   |
|              |             | Number Street             |   |                      |   |
|              |             | City                      | State   | Zip Code             |   |
| 3. <b>Ir</b> | n Colun     | nn 1, list all of yoເ     | ur codebtors. Do not include your spouse as a codebt  | tor if your spou     | se is filing with you. List the person          |
|              |             | -                         | a codebtor only if that person is a guarantor or cosign   | -                    |   |
|              |             | •                         | n 106D), Schedule E/F (Official Form 106E/F), or Sched<br>e G to fill out Column 2.                             | dule G (Official     | Form 106G). Use Schedule D,                     |
| 3            | criedui     | ie E/F, Of Scriedul       | e G to fill out Column 2.   |                      |   |
|              | Colum       | nn 1: Your codebto        | or  |                      | Column 2: The creditor to whom you owe the debt |
|              |             |                           |   |                      | Check all schedules that apply:                 |
| 3.1          | Sylv        | ria Owens                 |   |                      | Schedule D, line1                               |
|              | Name        | 7 Db 1 D                  |   |                      | Schedule E/F, line                              |
|              | Numb        | 7 Pheasant Run  er Street |   | _                    |   |
|              | Zion        |                           | IL 6  | 0099                 | Schedule G, line                                |
|              | City        |                           | State Z   | ip Code              |   |
| 3.2          | Aaro        | on F. Cain                |   | _                    | Schedule D, line2                               |
|              | Name<br>182 | 4 Joppa Ave.              |   |                      | Schedule E/F, line                              |
|              | Numb        | er Street                 |   | _                    | Schedule G, line                                |
|              | Zion        | <u> </u>                  |   | 0099<br>_<br>ip Code |   |
| 3.3          | Oily        |                           | Ciale Z   | - Joue               | Schedule D, line                                |
|              | Name        |                           |   |                      | Schedule E/F, line                              |
|              | Numb        | per Street                |   | _                    | Schedule G, line                                |
|              | City        |                           | State Z   | _<br>ip Code         |   |
|              |             |                           |   |                      |   |

|  | Docur  | ment Page 28                  | 3 of 55                         |                                    |
|--|--|-------------------------------|---------------------------------|------------------------------------|
| ill in this information to identify yo   |  |                               |                                 |                                    |
| Debtor 1 Bessie  | M  | Cain                          | ]                               |                                    |
| First Name   | Middle Name  | Last Name                     |                                 |                                    |
| ebtor 2  pouse, if filing) First Name  | Middle Name L  | Last Name                     |                                 |                                    |
| nited States Bankruptcy Court for the : _  | NORTHERN DISTRICT OF ILLINOIS  |                               |                                 |                                    |
| ase Number   |  | _                             | Check if this is:               |                                    |
| f known)   |  |                               | An amend                        | led filing                         |
|  |  |                               | <b>—</b>                        | nent showing post-petition         |
|  |  |                               | chapter 13                      | 3 income as of the following date: |
| <u>icial Form 106I</u>   |  |                               | MM / DD /                       | YYYYY                              |
| hedule I: Your Inc   | nme  |                               |                                 |                                    |
| nedule ii Todi iiici   | JIII <del>C</del>  |                               |                                 |                                    |
| Tt1: Describe Employment Fill in your employment   |  |                               |                                 |                                    |
| information  |  | Debtor 1                      |                                 | Debtor 2 or non-filing spouse      |
| If you have more than one job,   |  |                               | _                               | ¬                                  |
| attach a separate page with information about additional   | Employment status  | Employed                      | L                               | Employed                           |
| employers.   |  | X Not employed                | Ľ                               | Not employed                       |
| Include part-time, seasonal, or self-employed work.  | On a constitution  |                               |                                 |                                    |
|  | Occupation   |                               |                                 |                                    |
| Occupation may Include student   |  |                               |                                 |                                    |
| or homemaker, if it applies.   | Employers name   |                               |                                 |                                    |
| or homemaker, if it applies.   | Employers name Employers address   |                               |                                 |                                    |
| or homemaker, if it applies.   |  |                               |                                 |                                    |
| or homemaker, if it applies.   |  |                               |                                 |                                    |
| or homemaker, if it applies.   |  |                               |                                 |                                    |
| or homemaker, if it applies.   | Employers address  |                               |                                 |                                    |
|  | Employers address  How long employed there?  |                               |                                 |                                    |
| t 2: Give Details About Monthl Estimate monthly income as of t   | Employers address  How long employed there?  by Income  the date you file this form. If you have   | ave nothing to report for a   | ny line, write \$0 in the space | ce. Include your non-filing        |
| Give Details About Monthle  Estimate monthly income as of the spouse unless you are separated.                                     | Employers address  How long employed there?  ly Income  he date you file this form. If you have  |                               |                                 |                                    |
| Give Details About Monthle  Estimate monthly income as of the spouse unless you are separated.                                     | Employers address  How long employed there?  Iy Income  the date you file this form. If you have more than one employer, combined the complex of the complex | ine the information for all e |                                 |                                    |
| Cive Details About Monthly  Estimate monthly income as of the spouse unless you are separated. If you or your non-filing spouse ha | Employers address  How long employed there?  Iy Income  the date you file this form. If you have more than one employer, combined the complex of the complex | ine the information for all e |                                 |                                    |
| Give Details About Monthle  Estimate monthly income as of the spouse unless you are separated. If you or your non-filing spouse ha | Employers address  How long employed there?  Iy Income  the date you file this form. If you have more than one employer, combined the complex of the complex | ine the information for all e |                                 |                                    |

3. Estimate and list monthly overtime pay. \$0.00 \$0.00 Calculate gross income. Add line 2 + line 3. \$0.00 \$0.00

deductions). If not paid monthly, calculate what the monthly wage would be.

Official Form 106I Record # 755252 Schedule I: Your Income Page 1 of 2

\$0.00

\$0.00

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|              |                |  |                 | For Debtor 1             | For Debtor 2 or non-filing spouse |                       |
|--------------|----------------|--|-----------------|--------------------------|-----------------------------------|-----------------------|
|              | Copy           | y line 4 here  | 4.              | \$0.00                   | \$0.00                            |                       |
| 5. <b>L</b>  | ist all        | payroll deductions:  |                 |                          |                                   |                       |
|              | 5a. <b>T</b>   | Tax, Medicare, and Social Security deductions  | 5a.             | \$0.00                   | \$0.00                            |                       |
|              | 5b. <b>N</b>   | Mandatory contributions for retirement plans   | 5b.             | \$0.00                   | \$0.00                            |                       |
|              | 5c. <b>V</b>   | oluntary contributions for retirement plans  | 5c.             | \$0.00                   | \$0.00                            |                       |
|              | 5d. <b>F</b>   | Required repayments of retirement fund loans   | 5d.             | \$0.00                   | \$0.00                            |                       |
|              | 5e. <b>I</b>   | nsurance   | 5e.             | \$0.00                   | \$0.00                            |                       |
|              | 5f. <b>C</b>   | Domestic support obligations   | 5f.             | \$0.00                   | \$0.00                            |                       |
|              | 5g. <b>L</b>   | Jnion dues   | 5g.             | \$0.00                   | \$0.00                            |                       |
|              | 5h. <b>C</b>   | Other deductions. Specify:   | 5h.             | \$0.00                   | \$0.00                            |                       |
| 6. <b>A</b>  | dd the         | payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g +5h.   | 6.              | \$0.00                   | \$0.00                            |                       |
| 7. <b>C</b>  | alcula         | te total monthly take-home pay. Subtract line 6 from line 4.   | 7.              | \$0.00                   | \$0.00                            |                       |
| 8. <b>Li</b> | st all         | other income regularly received:   |                 |                          |                                   |                       |
|              | 8a.            | Net income from rental property and from operating a business,   |                 |                          |                                   |                       |
|              |                | profession, or farm  |                 |                          |                                   |                       |
|              |                | Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total  |                 |                          |                                   |                       |
|              |                | monthly net income.  | 8a.             | \$0.00                   | \$0.00                            |                       |
|              | 8b.            | Interest and dividends   | 8b.             | \$0.00                   | \$0.00                            |                       |
|              | 8c.            | Family support payments that you, a non-filing spouse, or a  | 8c.             | \$ 0.00                  | \$ 0.00                           |                       |
|              |                | dependent regularly receive  |                 |                          |                                   |                       |
|              |                | Include alimony, spousal support, child support, maintenance, divorce  |                 |                          |                                   |                       |
|              |                | settlement, and property settlement.   |                 |                          |                                   |                       |
|              | 8d.            | Unemployment compensation  | 8d.<br>_        | \$0.00                   | \$0.00                            |                       |
|              | 8e.            | Social Security  | 8e.<br>_        | \$1,309.00               | \$1,324.00                        |                       |
|              | 8f.            | Other government assistance that you regularly receive   | 8f.<br>         | \$0.00                   | \$0.00                            |                       |
|              |                | Include cash assistance and the value (if known) of any non-cash   |                 |                          |                                   |                       |
|              |                | assistance that you receive, such as food stamps (benefits under the   |                 |                          |                                   |                       |
|              |                | Supplemental Nutrition Assistance Program) or housing subsidies.   |                 |                          |                                   |                       |
|              | Q <sub>Q</sub> | Specify: Pension or retirement income  | 9.0             | <b>\$0.00</b>            | <b>CO OO</b>                      |                       |
|              | 8g.            |  | 8g.<br>_        | \$0.00                   | \$0.00                            |                       |
| •            | 8h.            | Other monthly income. Specify:   | 8h.<br>_        | \$0.00                   | \$0.00                            |                       |
| 9.           | Add            | all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.  | 9               | \$1,309.00               | \$1,324.00                        |                       |
| 10.          | Calc           | ulate monthly income. Add line 7 + line 9.   | 10.             | \$1,309.00 +             | \$1,324.00                        | \$2,633.00            |
|              | Add            | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.   | L               | <b>V</b> 1,000.00        | ¥ 1,02 1100                       | Ψ2,000.00             |
| 11.          | other<br>Do n  | e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your friends or relatives.  In the contribution of the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your friends or relatives.  The contribution of the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your friends or relatives. | our depender    | o pay expenses listed in |                                   | 11. \$0.00            |
| 12.          | Add            | the amount in the last column of line 10 to the amount in line 11. The re-   | sult is the cor | nbined monthly income.   |                                   |                       |
|              |                | e that amount on the Summary of Schedules and Statistical Summary of Co  |                 | •                        | applies                           | 12. <b>\$2,633.00</b> |
| 13.          | X              | ou expect an increase or decrease within the year after you file this form<br>No.<br>Yes. Explain:   | 1?              |                          |                                   |                       |

| Fi   | II in this in                | formation to identify y  | our case:   |  |   |   |                                 |
|------|------------------------------|--|---|--|---|---|---------------------------------|
| D    | ebtor 1                      | Bessie   | М   | Cain   | Check if the  | nis is:                                       |                                 |
|      |                              | First Name   | Middle Name   | Last Name  |   | mended filing                                 |                                 |
|      | ebtor 2<br>pouse, if filing) | First Name   | Middle Name   | Last Name  |   | pplement showing po<br>ne as of the following | st-petition chapter 13<br>date: |
| U    | nited States                 | Bankruptcy Court for the :   | NORTHERN DISTRICT C                                 | OF ILLINOIS  |   |   |                                 |
|      | ase Number                   | r  |   |  | MM /  | DD / YYYY                                     |                                 |
| Off  | icial E                      | orm 106 I  |   |  |   | -   | r 2 because Debtor 2            |
|      |                              | orm 106J   |   |  | — main  | tains a separate hous                         | sehold.                         |
|      |                              | e J: Your Ex   |   |  |   |   | 12/14                           |
|      | space is i                   |  |   |  | n are equally responsible for s<br>ages, write your name and ca |   |                                 |
| Pa   | rt 1:                        | Describe Your Househol   | d   |  |   |   |                                 |
| 1. I | =                            | Go to line 2.  Does Debtor 2 live in a                             | a separate household?<br>ust file a separate Schedu | le J.  |   |   |                                 |
| 2.   | _                            | have dependents?   | X No  | this information for                                   | Dependent's relationship<br>Debtor 1 or Debtor 2                | Dependent's age                               | Does dependent live with you?   |
|      | Debtor 2                     |  |   | dent   |   |   | X No                            |
|      | Do not st                    | tate the dependents'   |   |  |   |   | Yes                             |
|      | aoo.                         |  |   |  |   |   | X No<br>Yes                     |
|      |                              |  |   |  |   |   | X No                            |
|      |                              |  |   |  |   |   | Yes                             |
|      |                              |  |   |  |   |   | X No                            |
|      |                              |  |   |  |   |   | Yes                             |
|      |                              |  |   |  |   |   | X No                            |
|      |                              |  |   |  |   |   | Yes                             |
| 3.   | expense                      | expenses include<br>es of people other than<br>and your dependents | 1 1   |  |   |   |                                 |
| Pa   | rt 2:                        | Estimate Your Ongoing I  | Monthly Expenses                                    |  |   |   |                                 |
| expe | _                            | of a date after the bank   |   | =  | rm as a supplement in a Chap<br>I, check the box at the top of  |   |                                 |
|      | -                            | -  | =   | nce if you know the value<br>Income (Official Form 106 |   |   | Your expenses                   |
|      |                              |  |   | ·  |   | _   |                                 |
| 4.   |                              | for the ground or lot.   | expenses for your resid                             | ence. Include first mortgag                            | ge payments and   | 4.  | \$772.00                        |
|      | If not inc                   | cluded in line 4:  |   |  |   |   |                                 |
|      | 4a. Re                       | eal estate taxes   |   |  |   | 4a.   | \$0.00                          |
|      | 4b. Pro                      | operty, homeowner's, o   | r renter's insurance                                |  |   | 4b.   | \$0.00                          |
|      | 4c. Ho                       | ome maintenance, repai   | ir, and upkeep expenses                             |  |   | 4c.   | \$100.00                        |
|      | 4d. Ho                       | meowner's association  | or condominium dues                                 |  |   | 4d.   | \$0.00                          |

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Bessie Debtor 1

First Name

M

Middle Name

Document

Last Name

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Your expenses \$0.00 5 Additional Mortgage payments for your residence, such as home equity loans 6. **Utilities:** \$200.00 6a. 6a. Electricity, heat, natural gas \$70.00 6b. Water, sewer, garbage collection \$250.00 Telephone, cell phone, internet, satellite, and cable service \$ 0.00 Other. Specify: 6d. \$600.00 7. 7. Food and housekeeping supplies \$0.00 8. 8. Childcare and children's education costs \$120.00 9. Clothing, laundry, and dry cleaning 10. \$90.00 Personal care products and services 10. \$100.00 11. Medical and dental expenses 11. \$170.00 **Transportation.** Include gas, maintenance, bus or train fare. 12. Do not include car payments. \$100.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations 14. \$0.00 14. 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. \$0.00 15a. 15a. Life insurance \$0.00 15b. Health insurance 15b. \$50.00 15c. Vehicle insurance 15c. \$0.00 15d. 15d. Other insurance. Specify: 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 16 17. Installment or lease payments: \$0.00 17a. 17a. Car payments for Vehicle 1 \$0.00 17b. Car payments for Vehicle 2 17b \$0.00 17c. 17c. Other. Specify:\_ \$0.00 17d. Other. Specify: 17d. 18. Your payments of alimony, maintenance, and support that you did not report as deducted \$0.00 from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. \$0.00 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$ 0.00 20b. \$ 0.00 20b. Real estate taxes \$ 0.00 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00 20d. 20d. Maintenance, repair, and upkeep expenses \$ 0.00 20e 20e. Homeowner's association or condominium dues

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| Deptor | DC331     |   | Ouiii                                | Case Number (if known) |               |            |
|--------|-----------|---|--------------------------------------|------------------------|---------------|------------|
|        | First Nan | ne Middle Name                              | Last Name                            |                        |               |            |
| 21.    | Other. S  | pecify: Postage/Bank Fees (\$5.00),         |                                      | _                      | 21.           | \$5.00     |
| 22     |           | nthly expense: Add lines 4 through 21.      |                                      |                        | 22.           | \$2,627.00 |
|        | The resul | t is your monthly expenses.                 |                                      |                        |               |            |
|        |           |   |                                      |                        |               |            |
| 23.    | Calculate | your monthly net income.                    |                                      |                        |               |            |
|        | 23a.      | Copy line 12 (your comibined monthly i      | ncome) from Schedule I.              |                        | 23a.          | \$2,633.00 |
|        | 23b.      | Copy your monthly expenses from line        | 22 above.                            |                        | 23b. <b>–</b> | \$2,627.00 |
|        | 23c.      | Subtract your monthly expenses from y       | our monthly income.                  |                        | 23c.          | \$6.00     |
|        |           | The result is your monthly net income.      |                                      |                        |               |            |
|        |           |   |                                      |                        |               |            |
|        |           |   |                                      |                        |               |            |
|        |           |   |                                      |                        |               |            |
|        |           |   |                                      |                        |               |            |
|        |           |   |                                      |                        |               |            |
| 24.    | Do you e  | xpect an increase or decrease in your e     | xpenses within the year after you    | u file this form?      |               |            |
|        | For exam  | ple, do you expect to finish paying for you | ır car loan within the year or do yo | ou expect your         |               |            |
|        | mortgage  | payment to increase or decrease because     | se of a modification to the terms of | f your mortgage?       |               |            |
|        | X No      |   |                                      |                        |               |            |
|        | Yes.      | Explain Here:                               |                                      |                        |               |            |
|        |           |   |                                      |                        |               |            |
|        |           |   |                                      |                        |               |            |
|        |           |   |                                      |                        |               |            |
|        |           |   |                                      |                        |               |            |
|        |           |   |                                      |                        |               |            |

 Official Form 106J
 Record #
 755252
 Schedule J: Your Expenses
 Page 3 of 3

| formation to ident   | tify your case:                                     |  |
|----------------------|---|--|
| Bessie               | M   | Cain   |
| First Name           | Middle Name   | Last Name  |
|                      |   |  |
| First Name           | Middle Name   | Last Name  |
| Bankruptcy Court for | the : <u>NORTHERN</u> District of                   | ILLINOIS (State)   |
|                      | Bessie First Name  First Name  Bankruptcy Court for | First Name Middle Name  First Name Middle Name  Bankruptcy Court for the : <u>NORTHERN</u> District of |

### Official Form 106 Dec

#### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Sign Below   |   |
|--|---|
| Did you pay or agree to pay someone who is NOT a     | an attorney to help you fill out bankruptcy forms?  |
| No   |   |
| Yes. Name of Person                                  | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
|  |   |
|  |   |
| Under penalty of periury. I declare that I have read | the summary and schedules filed with this declaration and that they are true and              |
| correct.   |   |
| 🗶 /s/ Bessie M Cain                                  | ×   |
| Signature of Debtor 1                                | Signature of Debtor 2   |
| Date11/13/2017                                       | Date  |
| MM / DD / YYYY                                       | MM / DD / YYYY  |
|  |   |

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| Debtor 1         Bessie         M         Cain           First Name         Middle Name         Last Name           Debtor 2<br>(Spouse, if filing)         First Name         Middle Name         Last Name           United States Bankruptcy Court for the :         NORTHERN District of ILLINOIS (State) |
|---|
| Debtor 2 (Spouse, if filing) First Name Middle Name Last Name  United States Bankruptcy Court for the : NORTHERN District of ILLINOIS (State)   |
| United States Bankruptcy Court for the : <u>NORTHERN</u> District of <u>ILLINOIS</u> (State)  |
| (State)   |
|   |

# Official Form 107

#### Statement of Financial Affairs for Individuals Filing for Bankruptcy

12/15

|  | tal Status and Where You Lived Before                                     | ,                                    |                      |   |
|--|---|--------------------------------------|----------------------|---|
| What is your current marital status?   |   |                                      |                      |   |
| Married  |   |                                      |                      |   |
| Not married  |   |                                      |                      |   |
| During the last 3 years, have you live   | ed anywhere other than where you l  | live now?                            |                      |   |
| No.  |   |                                      |                      |   |
| Yes. List all of the places you lived  | in the last 3 years. Do not include w                                     | here you live now.                   |                      |   |
| Debtor 1   | Dates Debto   |                                      |                      | Dates Debtor 2  |
|  | lived there   |                                      |                      | lived there   |
| Did you have any income from emplored in the total amount of income you refigure a joint case and you have.  No. | oyment or from operating a busines received from all jobs and all busines | ses, including part-time activities. | <del>-</del>         |   |
| Yes. Fill in the details   |   |                                      |                      |   |
|  | Debtor 1  |                                      | Debtor 2             |   |
| _  | Sources of income   | Gross income                         | Sources of income    | O !   |
|  | Check all that apply  | (before deductions and exclusions)   | Check all that apply | Gross income<br>(before deductions and<br>exclusions) |
|  |   | -                                    | Check all that apply | (before deductions and                                |
|  |   | -                                    | Check all that apply | (before deductions and                                |
|  |   | -                                    | Check all that apply | (before deductions and                                |

Case 17-34252 Doc 1 Filed 11/15/17 Entered 11/15/17 16:04:02 Desc Main Document Page 35 of 55 Debtor 1 Bessie M Cain Case Number (if known) First Name Middle Name Last Name  $^{05}$  Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No. Yes. Fill in the details Debtor 1 Debtor 2 Sources of income Gross income Sources of income **Gross income** Describe below. (before deductions and Describe below. (before deductions and exclusions) exclusions) Social Security \$14,399 From January 1 of current year until the date you filed for bankruptcy: Social Security \$15,708 For last calendar year: (January 1 to December 31, 2016) Social Security \$15,000 (approx) For last calendar year: (January 1 to December 31, 2015) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

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Bessie М Cain Case Number (if known) \_ Debtor 1 First Name Middle Name Last Name Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,225\* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,225\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of Total amount paid Amount you still owe Was this payment for... payments Seteru INC 14523 Sw Millikan Monthly \$595 \$93,109 Mortgage Car Way St Beaverton OR 97005 Credit card Loan repayment Suppliers or vendors Other Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Yes. List all payments to an insider. Dates of **Total amount** Amount you still Reason for this payment payment paid 08 Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. No. Yes. List all payments to an insider. Dates of **Total amount** Amount you still Reason for this payment Include creditor's name payment Part 4: Identify Legal actions, Repossessions, and Foreclosures

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| epto | L1 Dessie  | IVI   | Calli                           | Case Number (if kno  | own)                     |                    |
|------|--|---|---------------------------------|--|--------------------------|--------------------|
|      | First Name   | Middle Name   | Last Name                       |  |                          |                    |
|      |  | iding personal injury cases,                                |                                 | action, or administrative proceeding collection suits, paternity actions, so |                          |                    |
|      | Yes. Fill in the details                               |   |                                 |  |                          |                    |
|      |  |   | Nature of the case              | Court or agency  |                          | Status of the case |
|      | Within 1 year before you to Check all that apply and f |   | y of your property repossessed, | foreclosed, garnished, attached, se  | eized, or levied?        |                    |
|      | No. Go to line 11                                      |   |                                 |  |                          |                    |
|      | Yes. Fill in the information                           | ation below.  |                                 |  |                          |                    |
|      | = = =  | ou filed for bankruptcy, did<br>nent because you owed a c   |                                 | or financial institution, set off an   | y amounts from y         | our accounts       |
|      | No. Go to line 11                                      |   |                                 |  |                          |                    |
|      | Yes. Fill in the information                           | ation below.  |                                 |  |                          |                    |
|      | court-appointed receiver                               | filed for bankruptcy, was a<br>, a custodian, or another of |                                 | session of an assignee for the be  | nefit of creditors,      | a                  |
|      | No.  |   |                                 |  |                          |                    |
|      | Yes.   |   |                                 |  |                          |                    |
| Pa   | List Certain Gifts                                     | and Contributions   |                                 |  |                          |                    |
| 13   | Within 2 years before yo                               | u filed for bankruptcy, did                                 | you give any gifts with a total | value of more than \$600 per perso   | on?                      |                    |
|      | No.  |   |                                 |  |                          |                    |
|      | Yes. Fill in the details                               | for each gift.  |                                 |  |                          |                    |
| 14   | Within 2 years before yo                               | u filed for bankruptcy, did                                 | you give any gifts or contribut | tions with a total value of more tha   | nn \$600 to any ch       | arity?             |
|      | No.  |   |                                 |  |                          |                    |
|      | Yes. Fill in the details                               | for each gift.  |                                 |  |                          |                    |
|      | <u> </u>   | · ·   |                                 |  |                          |                    |
| Pa   | List Certain Loss                                      | es  |                                 |  |                          |                    |
|      | Within 1 year before you gambling?                     | filed for bankruptcy or sin                                 | ce you filed for bankruptcy, di | id you lose anything because of th   | neft, fire, other dis    | saster, or         |
|      | No.  |   |                                 |  |                          |                    |
|      | Yes. Fill in the details                               | for each gift   |                                 |  |                          |                    |
|      |  | g   |                                 |  |                          |                    |
| Pa   | art 7: List Certain Payr                               | nents or Transfers  |                                 |  |                          |                    |
| 16   | Wrate 4  | <u></u>   |                                 |  |                          |                    |
|      | consulted about seeking                                | bankruptcy or preparing a                                   | a bankruptcy petition?          | our behalf pay or transfer any propies for services required in your b       |                          | ou                 |
|      | ☐ No.  |   |                                 |  |                          |                    |
|      | Yes. Fill in the details                               |   |                                 |  |                          |                    |
|      | Party Contact Info                                     |   | Description and value of an     | y property transferred   | Date payment or transfer | Amount of payment  |
|      | Geraci Law L.L.C.                                      |   |                                 |  |                          | \$1,200.00         |
|      | 55 E. Monroe Street                                    | #3400   |                                 |  |                          |                    |
|      | Chicago,IL 60603                                       |   |                                 |  |                          |                    |
|      |  |   |                                 |  |                          |                    |
|      |  |   |                                 |  |                          |                    |
|      |  |   |                                 |  |                          |                    |
|      |  |   |                                 |  |                          |                    |
|      |  |   |                                 |  |                          |                    |
|      |  |   |                                 |  |                          |                    |

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Bessie M Cain Case Number (if known) \_\_\_\_\_\_

Last Name

|    | Party Contact Info  | Description and value of a  | any property transferred      | Date paym or transfer                                | ent Amount of payment                   |
|----|---|---|-------------------------------|--|---|
|    | Hananwill Credit Counseling   | Credit Counseling Services  |                               | 2017   | \$25.00                                 |
|    | _115 N. Cross St.   |   |                               |  |   |
|    | Robinson, IL 62454  |   |                               |  |   |
|    |   |   |                               |  |   |
|    |   |   |                               |  |   |
|    |   |   |                               |  |   |
|    |   |   |                               |  |   |
| 17 | Within 1 year before you filed for bankruptcy promised to help you deal with your creditor. Do not include any payment or transfer that y   | s or to make payments to your cre                                 |                               | fer any property to anyo                             | one who                                 |
|    | No.   |   |                               |  |   |
|    | Yes. Fill in the details.   |   |                               |  |   |
| 18 | Within 2 years before you filed for bankrupto transferred in the ordinary course of your bu Include both outright transfers and transfers Do not include gifts and transfers that you have No.  Yes. Fill in the details for each gift. | siness or financial affairs?<br>made as security (such as the gra | nting of a security intere    |  |   |
| 19 | Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-pr   |   | o a self-settled trust or s   | imilar device of which y                             | ou are a                                |
|    | ■ No. ■ Yes. Fill in the details for each gift.   |   |                               |  |   |
|    |   |   |                               |  |   |
| P  | List Certain Financial Accounts, Instru   | ments, Safe Deposit Boxes, and Stor                               | age Units                     |  |   |
| 20 | Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associ  No.   | other financial accounts; certifica                               | tes of deposit; shares in     |  |   |
|    | Yes. Fill in the details.   |   |                               |  |   |
|    |   | Last 4 digits of account number                                   | Type of account or instrument | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer |
| 21 | Do you now have, or did you have within 1 yo cash, or other valuables?  | ear before you filed for bankruptcy                               | , any safe deposit box o      | r other depository for se                            | ecurities,                              |
|    | No.   |   |                               |  |   |
|    | Yes. Fill in the details.   | Who else had access to it?  | Describe the conter           | nte  | Do you still                            |
|    |   | THIO GISE HAU ACCESS IO IL!                                       | Describe the conten           | ito  | have it?                                |
| 22 | Have you stored property in a storage unit of   | r place other than your home withi                                | n 1 year before you filed     | for bankruptcy?                                      |   |
|    | No.   |   |                               |  |   |
|    | Yes. Fill in the details.   |   |                               |  |   |
|    |   | Who else has or had access to it?                                 | Describe the conter           | nts  | Do you still have it?                   |
| P  | Identify Property You Hold or Control fo  | or Someone Else   |                               |  |   |
|    |   |   |                               |  |   |
|    |   |   |                               |  |   |
|    |   |   |                               |  |   |
|    |   |   |                               |  |   |
|    |   |   |                               |  |   |

First Name

Middle Name

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| Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.  No.  Yes. Fill in the details.  Where is the property?  Describe the property  Value  Part 10:  Give Details About Environmental Information  |  |  |  |  |  |  |  |
|---|--|--|--|--|--|--|--|
| for someone.  No.  Yes. Fill in the details.  Where is the property?  Describe the property  Value  Part 10:  Give Details About Environmental Information  |  |  |  |  |  |  |  |
| Yes. Fill in the details.  Where is the property?  Describe the property  Value  Part 10:  Give Details About Environmental Information   |  |  |  |  |  |  |  |
| Where is the property?  Describe the property  Value  Part 10:  Give Details About Environmental Information  |  |  |  |  |  |  |  |
| Part 10: Give Details About Environmental Information   |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
| r the purpose of Part 10, the following definitions apply:  Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of   |  |  |  |  |  |  |  |
| ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. |  |  |  |  |  |  |  |
| Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.  |  |  |  |  |  |  |  |
| ■ Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.   |  |  |  |  |  |  |  |
| Report all notices, releases, and proceedings that you know about, regardless of when they occurred.  |  |  |  |  |  |  |  |
| Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?  |  |  |  |  |  |  |  |
| ■ No.   |  |  |  |  |  |  |  |
| Yes. Fill in the details.   |  |  |  |  |  |  |  |
| Governmental unit Environmental law, if you know it Date of notice  |  |  |  |  |  |  |  |
| 25 Have you notified any governmental unit of any release of hazardous material?  |  |  |  |  |  |  |  |
| ■ No.   |  |  |  |  |  |  |  |
| Yes. Fill in the details.   |  |  |  |  |  |  |  |
| Governmental unit Environmental law, if you know it Date of notice  |  |  |  |  |  |  |  |
| Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.   |  |  |  |  |  |  |  |
| ■ No.  ☐ Yes. Fill in the details.  |  |  |  |  |  |  |  |
| Court or agency Nature of the case Status of the case   |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
| Part 11: Give Details About Your Business or Connections to Any Business  |  |  |  |  |  |  |  |
| Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?  |  |  |  |  |  |  |  |
| A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time   |  |  |  |  |  |  |  |
| A member of a limited liability company (LLC) or limited liability partnership (LLP)  |  |  |  |  |  |  |  |
| A partner in a partnership  |  |  |  |  |  |  |  |
| An officer, director, or managing executive of a corporation  |  |  |  |  |  |  |  |
| An owner of at least 5% of the voting or equity securities of a corporation   |  |  |  |  |  |  |  |
| No. None of the above applies. Go to Part 12.   |  |  |  |  |  |  |  |
| Yes. Check all that apply above and fill in the details below for each business.  |  |  |  |  |  |  |  |
| Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.  |  |  |  |  |  |  |  |
| ■ No.   |  |  |  |  |  |  |  |
| Yes. Fill in the details.   |  |  |  |  |  |  |  |
| Date issued   |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |

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 ebtor 1
 Bessie
 M
 Cain
 Case Number (if known)

 First Name
 Middle Name
 Last Name

| Part 12: Sign Below          |  |  |
|------------------------------|--|--|
| answers are true and c       | orrect. I understand that making a false statement ankruptcy case can result in fines up to \$250,000, o | tachments, and I declare under penalty of perjury that the<br>, concealing property, or obtaining money or property by fraud<br>or imprisonment for up to 20 years, or both. |
| ✗ /s/ Bessie M Ca            | in 🗶   |  |
| Signature of Debto           | or 1 Si  | gnature of Debtor 2  |
| Date 11/13/2017<br>MM / DD / | YYYY   | MM / DD / YYYY   |
| Did you attach addition      | al pages to Your Statement of Financial Affairs fo   | r Individuals Filing for Bankruptcy (Official Form 107)?   |
| No                           |  |  |
| Yes                          |  |  |
| Did you pay or agree to      | pay someone who is not an attorney to help you   | fill out bankruptcy forms?   |
| No                           |  |  |
| Yes. Name of pers            | on   | . Attach the Bankruptcy Petition Preparer's Notice,  Declaration, and Signature (Official Form 119).   |
|                              |  |  |

|        | Fill in this in      | Caso 17              |  | 11/15/17 Ent                       | tered 11/15/17 16:04:02<br>1 of 55        | Desc Main   |      |
|--------|----------------------|----------------------|--|------------------------------------|---|---|------|
|        |                      |                      | , , ,  |                                    | 1 01 55                                   |   |      |
|        | Debtor 1             | Bessie               | M  | Cain                               |   |   |      |
|        | Debtor 2             | First Name           | Middle Name  | Last Name                          |   |   |      |
|        | (Spouse, if filing)  | First Name           | Middle Name  | Last Name                          |   |   |      |
|        | United States        | Bankruptcy Court for | the : <u>NORTHERN</u> District of <u>ILLINOI</u>                               | <u>3</u>                           |   |   |      |
|        | Case Number          |                      |  | (State)                            |   | Check if this is an                                 |      |
|        | (If known)           |                      |  |                                    |   | amended filing                                      |      |
| $\cap$ | official F           | orm 108              |  |                                    |   |   |      |
|        |                      | <u>.</u>             | tion for Individuals F   | iling Under Ch                     | apter 7                                   |   | 12/1 |
|        |                      |                      | er chapter 7, you must fill out this for                                       |                                    | •   |   |      |
| •      | creditors hav        | e claims secured     | by your property, or   |                                    |   |   |      |
|        | =                    |                      | erty and the lease has not expired.  |                                    |   |   |      |
|        |                      |                      |  |                                    | by the date set for the meeting of credit | tors,   |      |
|        |                      |                      | ourt extends the time for cause. You<br>gether in a joint case, both are equal | -                                  | •   |   |      |
|        | -                    | ust sign and date    |  | y responsible for suppl            | ying corroot information.                 |   |      |
| Ве     | as complete          | and accurate as      | possible. If more space is needed, att   | ach a separate sheet to            | this form. On the top of any additional p | pages,  |      |
| ٧r     | ite your name        | e and case number    | er (if known).   |                                    |   |   |      |
|        | Part 1:              | List Your Creditors  | Who Have Secured Claims  |                                    |   |   |      |
| 1.     | For any cree         | <del>-</del>         | ted in Part 1 of Schedule D: Creditors   | Who Have Claims Secu               | red by Property (Official Form 106D), fi  | II in the   |      |
|        | Identify the         | creditor and the p   | property that is collateral  | What do you intend secures a debt? | to do with the property that              | Did you claim the property as exempt on Schedule C? |      |
|        | Creditor's           |                      |  | Surrender th                       | ne property                               | ■ No  |      |
|        | name:                | Baxter Cr            | edit Union   | =                                  | property and redeem it                    | ☐ Yes   |      |
|        | Description          | on of 2010 Mits      | ubishi Lancer with over 50,000 miles   |                                    | property and enter into a                 | □ 163   |      |
|        | Description property | 111 01               |  | Reaffirmatio                       | on Agreement.                             |   |      |
|        | securing of          | debt:                |  | Retain the p                       | property and [explain]:                   |   |      |
| _      |                      |                      |  |                                    |   |   |      |
|        | Creditor's           | 0-4 101              | •  | Surrender th                       | , , ,                                     | No  |      |
|        | name:                | Seteru IN            | <i>-</i>   |                                    | property and redeem it                    | ☐ Yes   |      |
|        | Description          |                      | oa Ave. Zion IL 60099 - Primary  |                                    | property and enter into a                 |   |      |
|        | property             | Residence            |  |                                    | on Agreement.                             |   |      |
|        | securing of          | debt:                |  | ☐ Retain the p                     | property and [explain]:                   |   |      |
| _      | Creditor's           |                      |  | ☐ Surrender th                     | ne property                               | <br>∏ No  | _    |
|        | name:                |                      |  |                                    | property and redeem it                    | ☐ Yes   |      |
|        | Dogorintio           | n of                 |  |                                    | property and enter into a                 | □ 163   |      |
|        | Description property | III OI               |  | <del>-</del>                       | on Agreement.                             |   |      |
|        | securing o           | lebt:                |  |                                    | property and [explain]:                   |   |      |
| _      | 0                    |                      |  |                                    |   |   | _    |
|        | Creditor's           |                      |  | Surrender th                       | • •                                       | ☐ No  |      |
|        | name:                |                      |  |                                    | property and redeem it                    | Yes   |      |
|        | Description          | n of                 |  | _                                  | property and enter into a                 |   |      |
|        | property             | dobt.                |  |                                    | on Agreement.                             |   |      |
|        | SECULIAN (           | IMUIT:               |  | I I RATAIN THA N                   | ICOPECTA SOU LEXUISIDI.                   |   |      |

Bessie

Case 17-34252

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First Name

| List Your | Unexpired | Personal | Property | Leases |
|-----------|-----------|----------|----------|--------|
|           |           |          |          |        |

| For any unevnired nersonal preparty lease that you listed in Catadyle O. Foreston Control                    | Inexpired Legace (Official Form 4000) |
|--|---------------------------------------|
| For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and L           |                                       |
| fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in |                                       |
| ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 to          | J.S.C. § 365(p)(2).                   |
| Describe your unexpired personal property leases   | Will the lease be assumed?            |
|  | П.,                                   |
| Lessor's name:   | □ No                                  |
|  | ☐ Yes                                 |
| Description of leased  |                                       |
| property:  |                                       |
| Lessor's name:   | ☐ No                                  |
|  | Yes                                   |
| Description of leased  |                                       |
| property:  |                                       |
|  |                                       |
| Lessor's name:   | □No                                   |
|  | Yes                                   |
| Description of leased  |                                       |
| property:  |                                       |
|  | П.,                                   |
| Lessor's name:   | □No                                   |
|  | □Yes                                  |
| Description of leased  |                                       |
| property:  |                                       |
| Logogr'o nomo:   | □No                                   |
| Lessor's name:   |                                       |
| Description of leased  | □Yes                                  |
| property:  |                                       |
| proporty.  |                                       |
| Lessor's name:   | □No                                   |
| Ecocol o Hamo.   |                                       |
| Description of leased  | □Yes                                  |
| property:  |                                       |
|  |                                       |
| Lessor's name:   | □No                                   |
|  |                                       |
| Description of leased  | ☐ Yes                                 |
| property:  |                                       |
|  |                                       |
| g:   |                                       |
| Part 3: Sign Below   |                                       |
| Under penalty of perjury, I declare that I have indicated my intention about any property of my estate       | that secures a debt and any           |
| personal property that is subject to an unexpired lease.   |                                       |
|  |                                       |
| 🗶 /s/ Bessie M Cain  |                                       |
| Signature of Debtor 1 Signature of Debtor 2  |                                       |
| Detad: 44/42/2047  |                                       |
| Date Dated: 11/13/2017   |                                       |
| וווו / טט / ווווו וועני וויוויו וועני וויוויו וועני וויוויו וועני וויוויו וועני וויוויוויוויו                |                                       |

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B2030 (Form 2030) (12/15)

## United States Bankruptcy Court NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

| In  | re           |                                      |  |                |  |                    |               |                    |           |
|-----|--------------|--------------------------------------|--|----------------|--|--------------------|---------------|--------------------|-----------|
| Bes | ssie M Cain  | / Debtor                             |  |                |  |                    | Case No:      |                    |           |
|     |              |                                      |  |                |  |                    | Chapter:      | Chapter 7          |           |
|     |              |                                      | DISCLOSUR  | E OF COM       | PENSATION                              | OF ATTORNEY        | Y FOR DEI     | BTOR               |           |
|     | npensation j | paid to me wit                       | 329(a) and Fed. Bankr<br>thin one year before the<br>half of the debtor(s    | e filing of th | e petition in ba                       | inkruptcy, or agre | ed to be paid | d to me, for servi | ces       |
|     | For legal    | services, I hav                      | ve agreed to accept  |                | \$1,200.00                             |                    |               |                    |           |
|     | Prior to the | he filing of thi                     | s statement I have rece  | eived          | \$1,200.00                             |                    |               |                    |           |
|     | Balance I    | Oue                                  |  |                | \$0.00                                 |                    |               |                    |           |
| 2.  | The sourc    | e of the comp                        | ensation paid to me wa   | ıs:            |  |                    |               |                    |           |
|     |              | otor(s)                              | Other: (specify)   |                |  |                    |               |                    |           |
| 3.  | The source   | e of compens                         | ation to be paid to me is  | s:             |  |                    |               |                    |           |
|     |              | ebtor(s)                             |  |                |  |                    |               |                    |           |
| 4.  | I hav        |                                      | Other: (specify) o share the above-discl                                     | losed compe    | ensation with a                        | ny other person u  | nless they ar | re members and a   | ssociates |
| 5.  | of m         | y law firm. A hed.  For the above-or | are the above-disclosed<br>copy of the agreement<br>disclosed fee, I have ag | t, together w  | rith a list of the                     | names of the peo   | ple sharing   | in the compensat   |           |
|     | bank         | ruptcy;                              | otor's financial situatio  |                | -                                      |                    | -             | -                  | ition in  |
|     | J. 110p.     |                                      | ing or any period, sen   |                | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | o wiw piwii wino.  | may so req    | unou,              |           |
| 6.  |              |                                      | debtor(s), the above-dis   |                | loes not includ                        | e the following se | ervice:       |                    |           |
|     |              |                                      |  | CI             | ERTIFICATIO                            | ON                 |               |                    | ]         |
|     |              | 1                                    | that the foregoing is a me for representation of                             | -              | -                                      | -                  | _             | or                 |           |
|     |              | Date: 11                             | /15/2017   | /              | s/ Marc Adam                           | Affolter           |               |                    |           |
|     |              | Date                                 |  | S              | Signature of At                        | torney             | •             |                    |           |
|     |              |                                      |  | _              | Geraci Law L.<br>Name of law fir       |                    |               |                    |           |

755252 Page 1 of 1 Record #

## Case 17-34252 Geraci Lawdd L.C15/intois Endiana Wisconsin 6:04:02 Desc Main Headquarters: 55 E. Monroe Street, #3400 CHD 100 UN 100 STREET OF LEGISTRONG STR

Date: 11/10/2017

Consultation Attorney: MAA

Record #: **755-252** 

### Retainer Agreement Chapter 7 - Pre-filing

| Services before filing in Court: I retain Geraci Law L.L.C. to prepare to file a Chapter 7 bankruptcy petition in court. I agree to pay, by debit only, a flat fee for services before filing in court of \$ _1,200.00 at \$ {} today,   |
|--|
| \$ {} per {  |
| t within 60 days of foday. Bankruptcy is time-sensitive may pay more than this amount to pre-pay   |
| post-filing services. After filing in court, any balance on the pre-filing fee is discharged. We will start preparing your documents as soon as you sign this contract. Work before signing is no charge. Work or Costs advanced AFTER filing in Court is not included in the pre-filing amount, unless you pay us for it in advance:  After we file your Chapter 7 bankruptcy in Court, we will advance your Court Cost of \$335. Your flat fee for services after case filing is   |
| through Discharge or case closing without discharge, (at which time our representation of you ceases) totalling \$   |
| The flat fee for pre-filing work pays for: consultation after hiring us, (before retaining us is free) preparation petition, phone calls, emails, web messages; processing and reviewing documents that we requested from you including faxes, email attachments, web uploads and mail; office appointment to review and sign your petition; filing your case in court. Excluded: appearance in any court or proceeding; taking calls from your creditors or bill collectors. If you decide to pre-pay, or pay for ALL services before and after we file your case in court, all work until case closing is included except: missed section 341 meetings; amendments to schedules; adversary proceedings; any motions including to reopen, avoid judgment liens, for enlargement of time; any contested matter including but not limited to objections to exemptions, motions to dismiss; attending rule 2004 examinations; reviewing documents that we did not specifically request from you; appearance other than bankruptcy court. With "flat fee", rather than hourly, you know in advance your entire cost unless additional work is required and it usually is cheaper, but you may choose to pay for our services billed hourly at \$75 -\$450/hour, and pay in advance a security retaier, which may cost you more, or less than a flat fee. Advance Payment Retainer. Payments on flat fee or hourly become our property or payment and are deposited into our operating account, not into a client trust account. We will only refund unearned fees You may enter into a security retainer agreement with another law firm: we will not because you may lose funds held in our trust account which may be assets in a Chapter 7.  |
| Termination. If you decide not to proceed, delay, fail to respond, fail to pay my attorneys or provide all information & sign my petition according to this schedule, I agree that Geraci Law may discontinue work and charge me for the work done to date at hourly rates shown above. We will only refund fees not earned. Wisconsin: We will submit any unresolved dispute about the fee to binding arbitration within 30 days or receiving written notice of the dispute. You may file a claim with the Wisconsin Lawyers' Fund for Client Protection if the we fail to provide a refund of unearned advanced fees. If you dispute the amount of the fee and want that dispute to be submitted to binding arbitration, you must provide written notice of the dispute to Geraci Law within 30 days of the mailing of the accounting. If we are unable to resolve the dispute to the satisfaction of you within 30 days after notice of the dispute from the client, we shall submit the dispute to binding arbitration.  (Time matters: You agree: to fully cooperate with us and provide all information required; use Client Corner and not to cause excessive work; the more than one attorney or staff will work on your file there is no extra charge for the entire Geraci Law Team, unlike single attorney "law firms". Change in circumstances: This flat fee is based on the facts you told us. If that changes, your fee may change. Exemption laws only protect a limited amount or property. File Chapter 13 if you have property not claimed as exempt, or risk turn over "non-exempt" property to a Trustee. No guarantee of Discharge Creditors or others may object to a chapter 7 discharge of certain debts or to any discharge, for a variety of reasons. Debts not discharged: truncational debts and tuition; most tax debts; undisclosed debts; maintenance or support; fines; fraud, stealing or intentional injury claims, debt of any property or incur any credit or debt before filing, and I must make full disclosure of all income, expenses, debt and assets on my bankruptcy petition as o |
| Date: 1/10, (7 x Dasie m. Clim X (Joint Debtor)  |
| Attorney for the Debtor(s), Representing Geraci Law L.L.C. rev 171110  |

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## UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re

| Bessie M Cain / Debtor | Bankruptcy Docket #: |
|------------------------|----------------------|
|                        | Judge:               |

#### **VERIFICATION OF CREDITOR MATRIX**

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

Dated: 11/13/2017 /s/ Bessie M Cain

**Bessie M Cain** 

X Date & Sign

Record # 755252 B 1D (Official Form 1, Exh.D)(12/08) Page 1 of 1

<sup>\*</sup> Joint debtors must provide information for both spouses. Penalty for making a false statement or concealing property: Fine up to \$500,000 or up to 5 years imprisonment or both. 18 U.S.C. 152 and 3571.

B 201A (Form 201A) (11/11)

#### UNITED STATES BANKRUPTCY COURT

#### NOTICE TO CONSUMER DEBTOR(S) UNDER §342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a joint case (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

#### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days **before** the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

#### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

#### Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total fee \$335

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are

B 201A (Form 201A) (11/11) 755252 Page 1 of 2 Record #

Page 2

Form B 201A, Notice to Consumer Debtor(s)

In re Bessie M Cain / Debtor

found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

## <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

#### Chapter 11: Reorganization (\$1,167 filling fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

#### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

#### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

| Dated: 11/13/2017 | /S/ Bessie ivi Cairi         |  |  |  |  |
|-------------------|------------------------------|--|--|--|--|
|                   | Bessie M Cain                |  |  |  |  |
| Dated: 11/15/2017 | /s/ Marc Adam Affolter       |  |  |  |  |
|                   | Attorney: Marc Adam Affolter |  |  |  |  |

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| .h.t *    | Bessie  | М   | Cain   | Case N  | lumber (if known)                           |  |  |
|-----------|---|---|--|---|---|--|--|
| otor 1    | First Name  | Middle Name   | Last Name  |   |   |  |  |
|           |   |   |  |   |   | • 4  |  |
| art (     | Answer These Question   | 16a Are Voll  | r debts primarily con  | sumer debts? Consumer deb   | ts are defined in 1                         | 1 U.S.C. § 101(8)  |  |
|           | What kind of debts do<br>you have?  | as "incurr<br>∐No. 0  | ed by an individual prim<br>Go to line 16b.                                      | arily for a personal, family, or ho                                     | usehold purpose."                           | Mil A  |  |
|           |   | 4Ch Are Vot   | Go to line 17.  Ir debts primarily bus   | siness debts? Business debts  | are debts that you                          | incurred to obtain                                       |  |
|           |   | money fo  | or a business or investme<br>Go to line 16c.                                     | ent or through the operation of th                                      | ne business or inv                          | estment.   |  |
|           |   |   | Go to line 17.  type of debts you owe 1  | that are not consumer debts or b  | usiness debts.                              |  |  |
|           |   |   |  |   |   |  |  |
|           | Are you filing under<br>Chapter 7?  | _   | m not filing under Chapt   |   |   |  |  |
|           | Do you estimate that after  | Yes. I ad   | m filing under Chapter 7<br>ministrative expenses ar                             | . Do you estimate that after any<br>re paid that funds will be availabl | exempt property i<br>e to distribute to u   | is excluded and<br>insecured creditors?                  |  |
|           | any exempt property is excluded and   |   | No.  |   |   |  |  |
|           | administrative expenses<br>are paid that funds will be<br>available for distribution<br>to unsecured creditors?   | Ĺ   | Yes.   |   |   |  |  |
|           | How many creditors do   | <b>1</b> -49  |  | 1,000-5,000   |   | ☐ 25,001-50,000<br>☐ 50,001-100,000                      |  |
|           | you estimate that you owe?  | ☐ 50-99<br>☐ 100-199<br>☐ 200-999   |  | ☐ 5,001-10,000<br>☐ 10,001-25,000                                       |   | ☐ More than 100,000                                      |  |
| 9.        | How much do you   | <b>□</b> \$0-\$50,  |  | \$1,000,001-\$10 million  |   | □\$500,000,001-\$1 billion □\$1,000,000,001-\$10 billion |  |
|           | estimate your assets to   | \$50,001  |  | ☐ \$10,000,001-\$50 million<br>☐ \$50,000,001-\$100 millio              |   | ☐\$10,000,000,001-\$50 billion                           |  |
|           | be worth?   |   | )1-\$500,000<br>)1-\$1 million   | □ \$100,000,001-\$500 milli   |   | ☐More than \$50 billion                                  |  |
| ACADADANA |   | ☐ \$0-\$50,   |  | ☐ \$1,000,001-\$10 million  |   | □\$500,000,001-\$1 billion                               |  |
| 0.        | How much do you estimate your liabilities   |   | 1-\$100,000  | ☐ \$10,000,001-\$50 million   | 1   | \$1,000,000,001-\$10 billion                             |  |
|           | to be?  |   | 01-\$500,000   | \$50,000,001-\$100 million  |   | □ \$10,000,000,001-\$50 billion                          |  |
|           |   | <b>□</b> \$500,00   | 01-\$1 million   | □ \$100,000,001-\$500 mill  | ion   | ☐ More than \$50 billion                                 |  |
| Pai       | t 7: Sign Below   |   |  |   |   |  |  |
|           | you   | I have exami  | ned this petition, and I d   | eclare under penalty of perjury t                                       | hat the information                         | n provided is true and                                   |  |
| -         | ,   | If I have chos<br>of title 11, Ur<br>under Chapt  | nited States Code. I und   | r 7, I am aware that I may procee<br>erstand the relief available under | ed, if eligible, unde<br>r each chapter, an | er Chapter 7, 11,12, or 13<br>d I choose to proceed      |  |
|           | If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). |   |  |   |   | attorney to help me fill out                             |  |
|           |   | I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.  I understand making a false statement, concealing property, or obtaining money or property by fraud in connection |  |   |   |  |  |
|           |   | with a bankr  | l making a false stateme<br>uptcy case can result in<br>§ 152, 1341, 1519, and 3 | fines up to \$250,000, or imprisor                                      | ning money or pro<br>nment for up to 20     | perty by traud in connection<br>) years, or both.        |  |
|           |   | * D   | ture of Debtor 1   | Cam   | Signature o                                 | f Debtor 2   |  |
|           |   | - 3   | ited on : # 1/3  |   | For and and                                 | _  |  |
|           |   | Execu   | ited on <u>: // / /</u>  | _/201/  | Executed of                                 | m<br>MM / DD / YYYY                                      |  |

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| Official Form 106 Dec<br>Declaration About an |             |                   |                     |
|---|-------------|-------------------|---------------------|
|   |             |                   |                     |
| (If known)                                    |             |                   | amended filing      |
| United States Bankruptcy Court for the :      |             | (State)           | Check if this is an |
| Debtor 2 (Spouse, if filing) First Name       | Middle Name | Last Name         |                     |
| Debtor 1 Bessie First Name                    | Middle Name | Cain<br>Last Name |                     |

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

|  |           | Sign Below  |                              |   |
|--|-----------|---|------------------------------|---|
| ***************************************  | Did you p | ay or agree to pay someone who is NOT an attorney     | to help you fill out bankrup | otcy forms?   |
| ***************************************  | No Yes.   | Name of Person  | ·                            | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
| AND THE PROPERTY OF THE PROPER |           |   |                              |   |
| ***************************************  | Under pe  | nalty of perjury, I declare that I have read the summ | ary and schedules filed with | n this declaration and that they are true and   |
| ***************************************  | * R       | essie M. Chin<br>iture of Debtor 1                    | Signature of Debtor          | 2   |
| **************************************   | Date      | : 11 / 13/2017<br>MM / DD / YYYY                      | Date MM / DD /               | <del>YYY</del>  |

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| Debtor 1   | First Name   | M<br>Middle Name              | Cain<br>Last Name               | Case Number (if known)   |  |  |  |
|--|--|-------------------------------|---------------------------------|--|--|--|--|
| 28 W   | Within:2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. |                               |                                 |  |  |  |  |
|  | No. Yes. Fill in the de  |                               | sued ******                     |  |  |  |  |
| Part   | _  |                               |                                 |  |  |  |  |
| I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  18 U.S.C. §§ 152, 1341, 1519, and 3571. |  |                               |                                 |  |  |  |  |
| <b>3</b>   | K Besse<br>Signature of De   | m, Can                        | Signature                       | of Debtor 2  |  |  |  |
| 990000000000000000000000000000000000000  | Date 1 / / MM / DI   | 9 /2017<br>D / YYYY           | Date<br>MN                      | 1 / DD / YYYY  |  |  |  |
| D  | Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?  |                               |                                 |  |  |  |  |
|  | No   |                               |                                 |  |  |  |  |
|  | Yes  |                               |                                 |  |  |  |  |
| D  | id you pay or agre   | e to pay someone who is not a | n attorney to help you fill out | bankruptcy forms?  |  |  |  |
| .  | No Yes. Name of p  | person                        |                                 | . Attach the Bankruptcy Petition Preparer's Notice,  Declaration, and Signature (Official Form 119). |  |  |  |

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Case Number (if known) \_

Cain

| r any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unex<br>in the information below. Do not list real estate leases. Unexpired leases are leases that are still in eff     | ect; the lease period has not yet |
|--|-----------------------------------|
| in the information below. Do not list real estate leases. <i>Onexpired leases are leases that all out meet</i><br>led. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C | C. § 365(p)(2).                   |
| Describe your unexpired personal property leases  Lessor's name:   | Will the lease be assumed? ☐ No   |
| Description of leased property:  | ☐ Yes                             |
| Lessor's name:   | □ No                              |
| Description of leased property:  | ☐ Yes                             |
| Lessor's name:   |                                   |
| Description of leased property:  |                                   |
| Lessor's name:   | No<br>                            |
| Description of leased property:  |                                   |
| Lessor's name:   | <br>                              |
| Description of leased property:  |                                   |
| Lessor's name:   | <br><br>                          |
| Description of leased property:  | ( GS                              |
| Lessor's name:   | ☐ No                              |
| Description of leased property:  | Ŭ Tes                             |
| Part 3: Sign Below   |                                   |
| nder penalty of perjury, I declare that I have indicated my intention about any property of my estate the ersonal property that is subject to an unexpired lease.  | hat secures a debt and any        |
| Signature of Debtor 1  Signature of Debtor 2   |                                   |
| Signature of Debtor 1  Date Dated: 1 / 13 / 20  MM / DD / YYYY  Date MM / DD / YYYY  |                                   |

Case 17-34252 Desc Main

# 2 Doc 1 Filed 11/15/17 Entered 11/15/17 16:04:02 Document Page 52 of 55 DISCLAIMER Debtors have read and agree:

- Divorce or family support debts to a spouse, ex-spouse, child, guardian ad litem or similar person or entity in connection with a separation agreement, divorce decree or court order are not dischargable. Priority support debts must be paid in full in your Chapter 13 or it cannot be confirmed. DEBTS YOU AGREED TO ASSUME IN MARITAL SETTLEMENT AGREEMENTS are NON-DISCHARGEABLE if your ex-spouse files an adversary complaint, and the Judge rules that (a) you do not have the ability to pay the debt OR (b) discharging such debt would result in a benefit to you that outweighs the detriment to ex-spouse or your child. You agree to get advice in writing from your divorce attorney and send to us with copy of agreement. You must list any ex-spouse or spouse as a creditor. No guarantee any divorce debt is dischargeable. Property you are still on title to, or have a right to in a divorce, may be taken by a Bankruptcy trustee in a Chapter 7 and sold, or may be disposable income in a 13.
- Student loans and educational benefits are not discharged in Chapter 7 or 13 if government insured loan or owed to non-profit school unless you pay us to file a complaint within the bankruptcy to prove repayment would be an "undue hardship", and win. Interest on student loans continue to run while you are in a
- Cosigners, joint applicants, debts of persons other than debtor, debts incurred during marriage in community property states, or for family support are not discharged and joint, community or co-signers are not protected from collection unless you pay 100% of the debt. Creditors can collect from co-signors and put your bankruptcy on their credit report, and report them negatively to credit bureaus. You may prevent this by making the regular payments to the creditor. Creditors can liquidate collateral of your co-signer and refuse to continue payment in installments. Property you are joint on with other persons can be LIQUIDATED to pay your creditors.
- TAX DEBTS. Most taxes are not discharged in bankruptcy. However, income tax debt (1040 type tax) can be discharged if the following four rules are met: (1). The tax return was DUE at least 3 YEARS (plus extensions) before the filing of your bankruptcy case. (2). You FILED your income tax return at least 2 YEARS before your bankruptcy was filed. (You did not file a return if the tax authority or IRS had to file one for you, or if you didn't send the return to the District Director) (3). You did not wilfully intend to evade the tax. (4). The tax must have been ASSESSED over 240 DAYS before the bankruptcy filing. We recommend you meet with the IRS or state department of revenue to make sure all the conditions have been met, before you hire us or file a bankruptcy. Fraudulent taxes and taxes on unfiled returns can be discharged in a Chapter 13 case. Time in an offers in compromise, & time in bankruptcy plus 6 months, will extend the above time periods. Employers' share of FICA & FUTA is dischargeable, but not trust fund taxes like the employee's funds or sales tax.
- 5. Fines, traffic tickets, parking tickets, penalties to governmental unit are not discharged in Chapter 7, may not be discharged in 13 without full payment.
- 6. Non filing spouse: If you file individually, your spouse is not our client. Only your debts are discharged. If you want to protect a non-filing spouse, pay their bills or file a joint case with them. Family expenses (medical bills, rent and necessities may be collected from a non-filing spouse). Wisconsin, community property is liable for community debts. 7. DUI PERSONAL INJURIES, DEBTS YOU DON'T LIST are not discharged.
- 8. DEBTS where creditors successfully object to discharge may survive Creditors, the Trustee, or Court, can try to deny discharge based on many factors,
- a. Income sufficient to pay a percentage of your unsecured debt. b. Failure to keep books and records documenting your financial affairs. c. Luxury purchases or cash advances within 60 days of filing or without intent or ability to repay. d. Debts you made by false pretenses, breach of fiduciary duty, wilful and malicious injuries to others e. Benefit overpayments like aid or unemployment if a determination of fraud has been made before or during bankruptcy. f. Failure to appear at meetings, court dates, or co-operate with the Trustee.
- 9. INTEREST ON NON-DISCHARGEABLE DEBTS in a Chapter 13 continues to accrue, and CREDITORS WHO DO NOT FILE CLAIMS in your Chapter 13 plan within 90 days (180 days for governmental units) of the meeting of creditors, do not get paid. Your plan and their claim should provide for interest at contract rate, or you will have to pay the debt outside the Chapter 13 plan. Property taxes must be paid by you directly to avoid sale for delinquent taxes.
- 10. LIQUIDATION OF REAL AND PERSONAL PROPERTY. If you file a Chapter 7, any property that is not listed and claimed exempt on Schedule C pursuant to state or federal law is taken and sold by the trustee to pay creditors. You agree to assume the risk that your property will be taken and sold by the bankruptcy trustee (at or less than what it is worth) if we can't protect it under applicable state law. You get a discharge, but the trustee can take property not listed and exempted on schedules B and C and sell it for whatever price will provide some benefit to creditors.
- 11. CHANGE IN LAWS. Laws & court cases change constantly. We can file your case today if you pay us in full (some attorneys give credit, we don't) pay the filing fee and sign your petition in our main office. ANY DELAY either in hiring us, or after, IS YOUR REPSONSIBILITY. ADVERSE RULINGS Judges that sit in adjoining courtrooms can rule differently on the same facts. We can predict but can't guarantee a judge will or will not rule against you. You accept the risk of a judge ruling against you, as in any lawsuit.
- 12. PAYMENTS TO CREDITORS YOU PREFERRED to pay more than \$600 in front of others, within 1 yr if a relative or insider, or within 90 days if another creditor, so don't pay off debts to keep credit cards or protect others. TRANSFERS OF PROPERTY within 4 years that made you unable to pay your debts at the time can be reversed by a Trustee and the transferee will have to give back the property you transferred.
- 13. SURRENDER OF PROPERTY Bankruptcy gets rid of debts, but real estate, condos and time shares remain in your name until a foreclosure sale or the lender accepts a deed in lieu of foreclosure. Turn condo keys over to condo association or remain liable for assessments after filing, and make sure you keep buildings & land insured and maintained and secured until it is taken back by lender or out of your name. If you let a house go vacant and pipes explode or someone gets
- 14. RIGHT TO RECEIVE inheritances, tax refunds, injury claims, compensation of any kind, insurance or realty commissions, are property of the bankruptcy estate and you will surrender these to the trustee unless they are claimed exempt on Schedule C, and no objection to your claim of exemption is upheld. Do not deduct extra money from taxes so you are entitled to a refund, change your W-9 if necessary.
- 15. JOINT ACCOUNT HOLDERS holders entire amount in the account could be taken by the trustee under Chapter 7.
- 16. MARRIED COUPLES GOING THROUGH DIVORCE: We have been advised to seek independent counsel for our bankruptcy. We understand that Peter Francis Geraci does not represent us with regard to any divorce matters and does not make any representations regarding what will happen in divorce court. We have decided to file a bankruptcy together dispite the fact that we are getting a divorce and our interests could be adverse. We have agreed to cooperate with each
- 17. AUTO LEASES & INSTALLMENT AGREEMENTS to purchase things, leases and almost all contracts will be void after bankruptcy. They are "executory contracts", and if they are of no benefit to the bankruptcy estate and not assumed within 60 days of filing, they are void. Debtors have been warned of this, and unless there is a novation under state law, or agreement not to use bankrptcy to void the contract, the debtors rights under the contract are extinguished. Debtor agrees to be responsible for obtaining such agreements or losing rights under such contracts. Debtor agrees that his or her attorney will not file motions to assume
- 18. Setoffs if you have money in a credit union or creditor account, or other loans that cross-collateralized, any money or property may be taken for both loans. The Undersigned have read the above & assume the risk that a debt is not discharged in bankruptcy, that our non-exempt property will be taken and sold by the bankruptcy trustee if it can't be protected, that the trustee might object if I/we have excess income, or change in State, Federal or Bankruptcy laws before the case is filed in Court AND WE HAVE TO READ, CHECK, & MAKE SURE OUR PETITION IS ACCURATE!!!!

Dated:

Bessie M Cain

X Date & Sign

Entered 11/15/17 16:04:02 Desc Main Case 17-34252 Doc 1 Filed 11/15/17 Page 53 of 55 Document

### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re

Bessie M Cain / Debtor

Bankruptcy Docket #:

Judge:

### VERIFICATION OF CREDITOR MATRIX

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

Dated: 1/1/3 /2017

**Bessie M Cain** 

X Date & Sign

<sup>\*</sup> Joint debtors must provide information for both spouses. Penalty for making a false statement or concealing property: Fine up to \$500,000 or up to 5 years imprisonment or both. 18 U.S.C. 152 and 3571.

## Case 17-34252 Doc 1 Filed 11/15/17 Entered 11/15/17 16:04:02 Desc Main Document Page 54 of 55

|  | Bessie                            | М  | Cain   |                    | Case Number (if known)   |  |   |
|--|-----------------------------------|--|--|--------------------|--------------------------|--|---|
| Debtor 1   | First Name                        | Middle Name  | Last Name  |                    |                          |  | ****                                    |
|  | , not don't                       |  |  |                    | Column A<br>Debtor 1     | Column B Debtor 2 or non-filing spouse |   |
|  |                                   |  |  |                    | \$0.00                   | \$0.00                                 | *************************************** |
| 8. <b>Une</b>  | mployment compen                  | sation   | -t received was a henefit  |                    |                          |  | ***                                     |
| und  | er the Social Security            | if you contend that the amour<br>Act. Instead, list it here: | •••••  |                    |                          |  | COLLONIA                                |
|  |                                   |  |  |                    |                          |  | *************************************** |
|  |                                   |  |  |                    |                          | 00.00                                  | *************************************** |
| ber  | efit under the Social             |  |  |                    | \$0.00                   | \$0.00                                 | *************************************** |
| Do   | not include any bene              | etits received under the Socia                               | ecify the source and amount.  I Security Act or payments red<br>or international or domestic<br>ate page and put the total on li |                    | \$0.00                   | \$ 0.00                                |   |
| 10:  | •                                 |  | _  |                    | \$ 0.00                  | \$0.00                                 | -                                       |
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|  |                                   | n separate pages, if any.                                    |  |                    | \$0.00                   | \$0.00                                 |   |
|  |                                   | urrent monthly income. Add literated to the total            | ines 2 through 10 for each<br>for Column B.  |                    | \$0.00                   | \$0.00                                 | = \$0.00                                |
| Part   | 2: Determine V                    | Whether the Means Test Applie                                | s to You   |                    |                          |  |   |
| 12. <b>C</b> :   | lculate vour curren               | t monthly income for the yea                                 | ar. Follow these steps:  |                    | O line 44 horo           | 12a.                                   | \$0.00                                  |
| 12   | a. Copy your total                | current monthly income from I                                | line 11  |                    | Copy line 11 here        |  | x 12                                    |
|  |                                   | ne number of months in a yea                                 |  |                    |                          |  | *************************************** |
| 12   |                                   | ır annual income for this part                               |  |                    |                          | 12b.                                   | \$0.00                                  |
| 13. C  | alculate the median               | family income that applies t                                 | o you. Follow these steps:   |                    |                          |  |   |
|  |                                   |  | l IL   |                    |                          |  |   |
|  | Il in the state in whic           |  |  |                    |                          |  |   |
| 1  |                                   | eople in your household.                                     | 2  |                    |                          | 13.                                    | \$67,254.00                             |
|  |                                   |  | size of household<br>, go online using the link spec<br>able at the bankruptcy clerk's   |                    | e                        | 10.                                    | \$07,204100                             |
| 14. F  | low do the lines con              | npare?   |  |                    | 0                        |  |   |
| 1.   | Go to Part 3.                     |  | n the top of page 1, check box   |                    |                          | - 100A 0                               |   |
| 1.   | 4b. Line 12b is m<br>Go to Part 3 | ore than line 13. On the top o<br>and fill out Form 122A-2.  | of page 1, check box 2, The p  | resumption of abu  | se is determined by For  | 11 1220-2.                             |   |
| Pa   | rt 3: Sign Belov                  |  |  |                    |                          |  |   |
|  | By signing here                   | e, I declare under penalty of p                              | perjury that the information on  | this statement and | in any attachments is tr | ue and correct.                        |   |
|  | Be                                | soi m.   | Can  |                    |                          |  |   |
| ***************************************  |                                   | Bessie M Cain  |  |                    |                          |  |   |
| VALUE OF THE PARTY | Date:: <u>/</u>                   | <u>/                                    </u>                 |  |                    |                          |  |   |
|  | If you checked                    | l line 14a, do NOT fill out or fi                            | le Form 122A-2.  |                    |                          |  |   |
|  | If you checked                    | i line 14b, fill out Form 122A-2                             | 2 and file it with this form.  |                    |                          |  |   |

Form B 201A, Notice to Consumer Debtor(s)

In re Bessie M Cain / Debtor

Page 2

found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

### Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

### Chapter 11: Reorganization (\$1,167 filling fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

## Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

X Date & Sign

Dated: 1 / 1 / 1 / 12017

Attorney: Marc Adam Affolter

Form B 201A, Notice to Consumer Debtor(s)